

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

INSPECTION REPORT
SANITARY LANDFILL, INDUSTRIAL SITES
DEMOLITION SITES, FLYASH SITES, SLAG SITES

COMMENTS:
FORM NO. 10, 11, & 12

ORIGINAL
(Red)

DISPOSAL FACILITY Metro Contai.
Corp. - Drum incinerator
DATE May 19, 1987

During the current 5/19/87 inspection, the following observations were made:

1. Incinerator residue is scattered on the floor.
2. Incinerator Ash not properly collected and stored, ash is not being stored in a container. Container is not covered.

Brian R. Beyer

Department of Environmental Resources Representative

[Signature]

Operator

APPLICANT, INSPECTOR, REGIONAL OFFICE

HAZARDOUS WASTE INSPECTION REPORT
TSD Facilities - Part A

FBR facility

ORIGINAL
(Red)

Date of inspection May 19, 1987 Time start 1:00 Time finish 2:30

Name of inspector Brian K. Boyd

Company, installation name Metro Container Corp.

Location Second + Price Sts. Trainer, Pa.

County Delaware Municipality Trainer Boro

Identification number PAD 044545895

Name of responsible official Sidney Levy

Title President

Mailing address Second + Price Sts. Trainer, Pa. 19066

Area code and phone no. (215) 485-6100

Name of person interviewed Steve Zubrin

Title Maintenance Spvr

Mailing address (if different from above) Same

Area code and phone no. _____

1. Site characterization:

- a. ☒ Treatment - ☐ surface impoundments, ☒ chemical, ☒ physical, ☐ biological
- b. ☐ Storage - ☐ containers, ☐ tanks, ☐ surface impoundments, ☐ waste piles
- c. ☐ Disposal - ☐ land treatment, ☐ landfill, ☐ incineration, ☐ thermal treatment
- d. ☐ Use, ☐ reuse, ☐ recycle, ☐ reclaim

2. Does the facility generate hazardous wastes? ☐ Yes ☐ No *Still unknown - haz. waste determination need to be done on all waste streams*

3. Types of hazardous waste produced by Hazardous Waste Number:

Type of wastes vary due to types of drums being processed. All waste is put into the wastewater treatment system.

4. Are hazardous wastes transported off-site by the facility? ☐ Yes ☐ No

HAZARDOUS WASTE INSPECTION REPORT
Part C - Comments

ORIGINAL
(P. 2)

Date of Inspection May 19, 1987 Identification Number PAD044515875
Company, Installation Name Metro Container Corp.
County Dekware Municipality Trainer Boro

At the time of this inspection 5/19/87, The following was observed:

1. Wastewater treatment process holding tank has overflowed onto the ground surface. Large amounts of oil containing waste exist on the ground surface.
2. Wastewater treatment process holding tank has no 2nd containment that is impervious.
3. The oil removal area of the WWT system has repeatedly overflowed, there is presently about 1 ft. (deep) of waste material on the ground.
4. The general housekeeping is still very poor, no improvements have been made.
5. There is an illegal discharge from Metro Container Corp. into Stony Creek.
6. Hazardous waste determinations have not been supplied to the Dept. as of yet.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Solid Waste Management, inspected the above installation. Findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Person Interviewed (signature) _____

Date _____

Inspector (signature) Brian Boyer

Date 5/19/87

1- NON-COMPLIANCE, 2- COMPLIANCE, 3- NOT APPLICABLE, 4- NOT DETERMINED

ORIGINAL
(Reg) CHAPTER
CITATIONCOMPLIANCE
STATUS

REQUIREMENT

1 2 3 4

Surface impoundment managed to maintain at least 60 cm (2 ft) of freeboard and to prevent overtopping of the dike by overfilling, wave action, or a storm.

(s) (2)

Protective cover on earthen dikes, such as suitable vegetation, rock rip-rap, or non-erodible material to minimize wind and water erosion.

(s) (3)

Waste analyses and/or trial tests conducted on hazardous wastes substantially different from wastes previously treated or stored; or chemically treat hazardous waste with a substantially different process than any previously used in that tank.

(s) (4)

Precautions taken for surface impoundments holding ignitable, reactive, or incompatible wastes.

(s) (5)

Freeboard level inspected once each operating day.

(s) (6) (1)

Surface impoundment, including dikes and vegetation surrounding the dike, inspected once a week.

(s) (6) (2)

Closure and post closure requirements are complied with.

(s) (7) (8)

(9)

Placement of ignitable or reactive waste only with Department's approval.

(s) (10)

Precautions taken for handling ignitable, reactive, or incompatible material

(s) (11)

**TREATMENT, STORAGE, DISPOSAL FACILITIES -
CHEMICAL, PHYSICAL, AND BIOLOGICAL TREATMENT**
75.265

ORIGINAL
(red)

1- NON-COMPLIANCE, 2-COMPLIANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED

[illegible]

1-NON-COMPLIANCE, 2-COMPLIANCE, 3-NOT APPLICABLE, 4-NOT DETERMINED

ORIGINAL
(Red)

COMPLIANCE STATUS				REQUIREMENT	CHAPTER CITATION
1	2	3	4		
				Containers managed to prevent leaks and spills	(q) (1), (
				Containers are compatible with waste stored.	(q) (2)
				Containers are closed during storage	(q) (3)
				Container storage area inspected weekly for leaks, deterioration, etc.	(q) (5)
				Containers holding ignitable or reactive wastes are set back 15 m (50 ft) from property line.	(q) (6)
				Satisfactory procedures followed for handling incompatible wastes.	(q) (7), (
				Incompatible wastes separated or protected from other materials.	(q) (9)
				Containers and tanks labeled to identify accurately hazardous waste contained.	Act 97
				Precautions taken for tanks holding ignitable, reactive, or incompatible waste or material	Section 403(b)
				Tanks managed to prevent leaks, rupture, corrosion, or otherwise failing.	(r) (2)
				Tanks managed to prevent leaks, rupture, corrosion, or otherwise failing.	(r) (3)
				Uncovered tanks operated to ensure at least 60 cm (2 ft) of freeboard.	(r) (4)
				Uncovered tanks equipped with an overflow alarm and an overflow device to a standby tank with a capacity equal to or exceeding the freeboard requirement.	(r) (4)
				Continuously fed tanks equipped with a means to stop the inflow.	(r) (5)
				Containment structure with a capacity that equals or exceeds the largest above ground tank volume plus a reasonable allowance for precipitation based on local weather conditions and plant operations provided for liquid storage in above ground or partially above ground tanks.	(r) (6)
				Waste analyses and/or trial tests conducted on hazardous wastes substantially different from wastes previously treated or stored; or chemically treat hazardous waste with a substantially different process than any previously used in that tank.	(r) (7)
				Discharge control equipment inspected once each operating day.	(r) (8) (i)
				Monitoring equipment data inspected once each operating day.	(r) (8) (ii)
				Liquid level of tanks inspected once each operating day.	(r) (8) (iii)
				Construction materials of tanks inspected weekly.	(r) (8) (iv)
				Construction materials of discharge confinement structures and area immediately surrounding inspected weekly.	(r) (8) (v)
				All hazardous waste removed from tanks and related appurtenances at closure.	(r) (9)
				Placement of ignitable or reactive waste only with the Department's approval	(r) (10)
				Covered tanks in which ignitable or reactive waste is treated or stored meets NEPA buffer zone requirements.	(r) (11)
				Precautions taken for handling ignitable, reactive or incompatible waste or material.	(r) (12), (13

1- NON-COMPLIANCE, 2- COMPLIANCE, 3- NOT APPLICABLE, 4- NOT DETERMINED

ORIGINAL
(D-00)COMPLIANCE
STATUS

REQUIREMENT

CHAPTER
CITATION
75.265

1 2 3 4

Part A permit application submitted.

(a) (2), (z

Identification number.

(b)

Wastes accepted at facility transported by haulers licensed to transport hazardous waste by the Department.

(b) (1)

Waste streams not covered by permit approved by the Department before acceptance (c)

Chemical and physical analyses repeated as required.

(c) (1)

All waste shipments inspected and sampled.

(c) (2)

Waste analysis plan on-site.

(c) (3)

24 hr. surveillance at active portion.

(d) (2) (i

Artificial barrier at active portion.

(d) (2) (i

Proper signs posted and legible at a distance of at least 25 ft.

(d) (3)

Inspection schedule on-site.

(e) (2)

Maintenance schedule on-site for equipment or structures which reveal deterioration or malfunction.

(e) (4)

Immediate remedial action taken where a hazard is imminent or has already occurred.

(e) (4)

On the job or classroom personnel training program.

(f)

Records retained for each employee at facility of training, job title, and job description.

(f) (6), (

Ignitable or reactive wastes separated from source of ignition or reaction.

(g) (1)

No smoking signs displayed where there are hazards from ignitable or reactive wastes.

(g) (1)

Treatment, storage, disposal of ignitable or reactive wastes or mixing of incompatible wastes or materials conducted according to requirements.

(g) (2)

Facility equipped with internal alarm system capable of providing immediate emergency instruction to personnel.

(h) (2) (i)

Facility equipped with a device for summoning outside emergency assistance.

(h) (2) (ii

Facility equipped with fire control, spill control, and decontamination equipment.

(h) (2) (ii

Facility equipped with water at adequate volume and pressure to supply fire control equipment.

(h) (2) (iv

Facility communications or alarm systems, fire control, spill control, and decontamination equipment tested and maintained.

(h) (3)

Adequate aisle space maintained to allow unobstructed movement of personnel and equipment during emergencies.

(h) (6)

Contingency plan on-site and implemented.

(i) (1)

Contingency plan describes action taken by personnel in the event of an emergency.

(i) (3)

Contingency plan describes arrangements agreed to for outside emergency services such as police and fire department, hospitals, contractors, etc.

(i) (5)

**DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT**

**INSPECTION REPORT
TRANSFER STATIONS, INCINERATORS,
COMPOSTING FACILITIES, PROCESSING PLANTS
FORM NO. 11**

IDENTIFICATION NUMBER (1-7) 400514		INSPECTION DATE (8-14) May 19, 1987	INSPECTORS SOC. SEC. NO. (18-24) B. Boyd <small>ORIGINAL (red)</small>
NAME OF DISPOSAL FACILITY Metro Container Co.		FACILITY ADDRESS Second + Price Sts. Trainer, Pa.	
MUNICIPALITY Trainer		COUNTY Delaware	
FACILITY PROPRIETOR (NAME, ADDRESS & TELEPHONE NUMBER) Sidney Levy Second + Price Sts Trainer, Pa.			
DAILY VOLUME RECEIVED um incinerator - volume varies		ANNUAL REPORT RECEIVED	DAYS PER WEEK OPERATED 5

1 - Compliance, 2 - Non-Compliance, 3 - Non-Applicable

CHAPTER CITATION		1	2	3
26 75.21(m)(3)	Suitable barrier blocks access to site when attendant is not present	✓		
27 75.21(b)(1), (2), (3)	Adequate fire equipment or procedure for minimizing fire hazard	✓		
28 75.21(i)	Site access roads are negotiable by loaded vehicles	✓		
29 75.21(q)	Approved operational safety program being utilized	✓		
30 75.21(m)(2)	Hours of operation prominently posted			✓
31 75.21(k)	Telephone or other communications available	✓		
32 75.21(o)(1)	Salvaging occurs in accordance with regulations			✓
3 75.21(r)(1), (2), (3), (4)	Operational records maintained and method of measurement provided			✓
4 75.21(p)	Effective vector control program utilized at site where needed. Circle vector program required: bird, mosquito, rodent, fly			✓
5 75.27(a), 75.30(m) & 75.34(d)(5)	Dust controlled at site	✓		
75.27(i), 75.30(i) & 75.34(d)(10)	Bulky wastes properly controlled	✓		
75.27(r), 75.30(h) & 75.34(c)(13)	Residues or effluents collected and properly disposed of		✓	
75.27(i), 75.30(m) & 75.34(d)(11), (15)	All areas of building/equipment properly maintained		✓	
75.27(f), 75.30(n) & 75.34(d)(11)	Plumbing properly maintained, floors free of standing water			

NAME		DATE	TIME	LOCATION	STATUS	REMARKS
42	75.27(a), 75.30(a) & 75.34(a)(1)					Emergency response plan available
43	75.27(a), 75.30(a) & 75.34(a)(5)					Waste storage facilities adequate and secure
44	75.27(a), 75.30(a) & 75.34(a)(6)					Operational records available
45	75.27(a), 75.34(a)(4) & 75.30(a)					Open burning of waste prohibited
46	75.27(a), (b), 75.30(a) & 75.34(a)(2)					Blowing from completed
47	75.27(f), 75.30(b) & 75.34(a)(12)					Monitoring systems and monitoring data requirements met
48	75.27(a) & 75.30(a)					Wastes accepted as approved by the Department
49	75.27(a), 75.30(a) & 75.34(a)(14)					Use appropriate ground cover established to prevent soil erosion on disturbed areas
50	75.27(a), 75.30(a) & 75.34(a)(8)					Operation in accordance with permit conditions and approved design plans



CHEM TEK SERVICES

PO BOX 1424 MALVERN, PA 19355 (215)436-4161

ORIGINAL
(Red)

Pennsylvania Department of
Environmental Resources
1875 New Hope St
Norristown, Pa 19401

6/26/87

Attn: Mr Neil O'Connor, Air Quality Specialist

Subject: PEDS Update Forms for 1986 Emissions/PEDS Worksheet - Incinerators

Dear Sir:

Enclosed please find subject forms as requested. Please let us know if there are any questions on the enclosed.

Very truly yours,

Gardner K Flynn, Jr
Engineering/Operations
Consultant

Address _____

"PDS" WORKSHEET - INCINERATORS
INITIAL REPORT - 19 DATA

ORIGINAL
(Red)**A. Description of Unit**

1. Company's name for the incinerator METRO ENTERPRISE CONTAINER CORP
2. Manufacturer HEAT'S PROCESS EQUIPMENT
3. Number of chambers 1
4. Number of burners: (a) Primary 8 (b) Secondary 4
5. Incinerator class (e.g. I, II, III, etc.) SEE NOTE 1 COMMENTS
6. Type of waste burned (e.g. 0, 1, 2, etc.) SEE NOTE 2
7. Rated capacity (lbs/hr) 180 Dens 1 HR.
8. Method of ash disposal SECURED LANDFILL
9. Date installed 9/86
10. Bureau of Air Quality permit number, if any 23-3011-100
11. Operating schedule for the audit year:
(a) Hours/year 2060 (b) Days/year 208 (c) Hours/day 10
12. Total amount of waste burned during the audit year (tons) 240
13. Percent of waste burned in each quarter of the audit year:
1st 60 2nd 60 3rd 60 4th 60

B. Fuel Data

1. Rated input of all burners combined (BTU's/hr) 12,100 BTU/hr
2. Type of fuel(s) used (e.g. #2 oil, natural gas, etc.) NATURAL GAS
3. Amount of each fuel consumed during the audit year. (ft³, gals.)
4. Percent sulfur in the fuel (excluding natural gas)
5. Operating schedule for each fuel during the audit year, if different from incinerator:
(a) Hours/year
(b) Days/year
(c) Hours/day
6. Percent thruput for each fuel during each quarter of the audit year:
(a) 1st.
(b) 2nd.
(c) 3rd.
(d) 4th.

Gas	Oil
5,533,600	—
—	—
2080	—
208	—
10	—
100	—
100	—
100	—
100	—

C. Control Equipment (if any)

1. Type of control device (e.g. wet scrubber) AFTER-BURNER
2. Manufacturer HEAT'S PROCESS EQUIPMENT
3. Date installed 9/86
4. Pressure drop (inches of water) NA
5. Pollutant(s) controlled VOLATILE ORGANICS
6. Collection efficiency(s) NA

Stack Information

1. Height above grade (ft.) 30
2. Inside diameter (ft.) 3'
3. Exhaust gas characteristics, if known from stack test:
 - (a) Flow volume in ACFM or SCFM (Please Specify)
 - (b) Temperature ($^{\circ}$ F)
 - (c) Percent moisture
 - (d) Percent CO₂
4. Actual emission rate for particulate matter (lbs/hr), if known from stack test

ORIGINAL
(Red)

Comments - Please describe any special characteristics of the incinerator that you believe are important and may have an effect on the type and/or amount of pollutants discharged.

(1) CLASS IS UNDETERMINED

(2) TYPE OF WASTE BURNED IS SMALL AMOUNT OF RESIDUE IN DRUMS PROCESSED FOR WHICH MSD SHEETS WERE ISSUED IN ACCORDANCE WITH PERMIT CONDITIONS

NOTES:

If multiple control devices or stacks are involved, appropriate information should be provided for each.

APFD126RO
YEAR: 1986

PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF AIR QUALITY CONTROL

DATE 6/01/86
PAGE

UPDATE FORMS FOR CALENDAR 1986 OPERATIONS

ORIGINAL
(Red)

METRO CONTAINER CORP.

23-2231601-0

LOCATION: TRAINER BOFO

COUNTY: DELAWARE

SIC: 3491

CONTACT: SIDNEY LEVY

** UTM COORDINATES ** ELE

ADDRESS: 2ND & PRICE (P.O.A)

TELEPHONE 2CNE HORIZ VERT (FT)

TRAINER, PA

19016

(215) ~~454-8200~~
405-6100

18 465.80 4408.35 001

SUMMARY OF FUEL USAGE AT THIS FACILITY:

TYPE	TOTAL USE	TYPE	TOTAL USE
#5 FUEL OIL	220,000		
NATURAL GAS	12,668,682		

SOURCE 031 BOILER ENGINEER & SUPPLY

RATED INPUT: 7.4

PERMIT NO:

ORDER NO:

FUEL: #5 OIL

%SULFUR 0.5

%ASH

BTU/LB-GAL-CUFT 140,00

USAGE PRIMARY FUEL

DATE INSTALLED 63/09/01

** SCHEDULE **

***** THRUPUT *****

** CATEGORY **

HRS/DAY 8.0

1ST QTR \$5,000.00 2ND QTR \$5,000.00

NESHAPS

DAYS/YR 250

3RD QTR \$5,000.00 4TH QTR \$5,000.00

NSPS

TOTAL HRS 2000

UNITS: GALLONS

PSD

CHANGES IN FUEL(S) USED, CONTROL DEVICE(S) OR EXHAUST NONE

SOURCE 101 PAINT BOOTH

MATERIAL: REFURBISH DRUMS

PERMIT NO: 23318004

ORDER NO:

** SCHEDULE **

***** THRUPUT *****

** CATEGORY **

HRS/DAY 16.0

1ST QTR 12.00 2ND QTR 12.00

NESHAPS

DAYS/YR 250

3RD QTR 12.00 4TH QTR 12.00

NSPS

TOTAL HRS 4000

UNITS: TONS

PSD

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST NONE

SOURCE 102 ACID STRIP/WASH SYSTEM

MATERIAL: RECOND. STEEL DR

PERMIT NO:

ORDER NO:

** SCHEDULE **

***** THRUPUT *****

** CATEGORY **

HRS/DAY 8.0

1ST QTR 1,392.00 2ND QTR 1,392.00

NESHAPS

DAYS/YR 250

3RD QTR 1,392.00 4TH QTR 1,392.00

NSPS

TOTAL HRS 2000

UNITS: TONS

PSD

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST NONE

APPD126R0
YEAR: 1986

PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF AIR QUALITY CONTROL

DATE 6/01/86
PAGE

UPDATE FORMS FOR CALENDAR 1986 OPERATIONS

METRO CONTAINER CORP.

ORIGINAL
23-2231601-0
(eq)

SOURCE 103 PRE-HEAT & BAKING OVEN
PERMIT NO: 23318004

MATERIAL: RECORDED STEEL D
ORDER NO:

** SCHEDULE **

HRS/DAY 16.0
DAYS/YR 250
TOTAL HRS 4000

***** THRUPUT *****

1ST QTR 168,000.00 2ND QTR
3RD QTR 168,000.00 4TH QTR 168,000.00
UNITS: POUNDS UNITS

** CATEGORY **

MESHAPS
NPS
PSD

FUEL: NATURAL GAS

%SULFUR --- %ASH --- BTU/LB-GAL-CU FT 1,000

** SCHEDULE **

HRS/DAY ---
DAYS/YR ---
TOTAL HRS ---

***** THRUPUT *****

1ST QTR 1,704.00 2ND QTR 1,704.00
3RD QTR 1,704.00 4TH QTR 1,704.00
UNITS: THOUSAND CU FT

** CATEGORY **

MESHAPS
NPS
PSD

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST

None

SOURCE 105 DRUM PNT STRIP SHOT BLAST
PERMIT NO:

MATERIAL: STEEL DRUM REFE
ORDER NO:

** SCHEDULE **

HRS/DAY 16.0
DAYS/YR 250
TOTAL HRS 4000

***** THRUPUT *****

1ST QTR 24,000.00 2ND QTR 24,000.00
3RD QTR 24,000.00 4TH QTR 24,000.00
UNITS: POUNDS

** CATEGORY **

MESHAPS
NPS
PSD

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST

None



CHEM TEK SERVICES

PO BOX 1424 MALVERN, PA 19355 (215)436-4161

ORIGINAL

Ruth M. Plant

Pa Department of
Environmental Resources
1875 New Hope St
Norristown, Pa 19401

6/26/87

Subject: Industrial Waste
Metro Container Corporation
Trainer Borough
Delaware County
Re: Your Letter Dated 6/9/87

Dear Ruth:

This is to confirm my conversation with you of 6/26/87 on the subject and is a review of the current status and future remedial action to be taken.

- (1) March 5, 1987 Inspection: The conditions enumerated in your letter are in the process of being corrected with the aquisition of a new waste treatment plant. On June 2, 1987 an order was placed with Komline-Sanderson to produce the following:
 - (a) Lift Station: This consists of supply pumps and a rotating screen to remove large debris to prevent pump clogging. It will be located just outside the production area, eliminating the pumphouse in the diked area. The lift station in the diked area as such will only function as an emergency overflow should the primary lift station fail.
 - (b) Rotating Vacuum Drum Precoat Filter: A 300 sq. ft. filter will replace the existing DAF unit eliminating the inventory of water generated due to partially or improperly treated water. The existing chemical treatment package will be utilized until the Komline treatment unit can be produced. The filter will be located in the existing waste treatment facility. All water will be filtered through the precoat and cake discharge from the filter will be deposited in a dumpster for proper disposal. One method of disposal currently being investigated is the use of a burnable precoat which introduces additional flexibility in incineration versus landfill. In addition, the use of the filter will allow the clean-up and disposal of all the wastes contained in the small and large concrete holding tanks. Estimated process rates are on the order of 1,000 gallons/hour.

Delivery time for the above equipment will be no later than 10 weeks from the date of the order and installation/start-up time to on-line operation estimated 4-6 weeks from delivery. This places the system in operation, barring any unforeseen events, sometime during the months of October-November, 1987.

- (2) Seeps: The seeps in question seem only to appear to be active during and immediately after heavy rains. Currently, we are instituting a daily log to check the general condition of the area to monitor this condition.

Please let me know if you require further details on the above or if I can be of further assistance, contact me as to your requirements.

ORIGINAL

Very truly yours,

A handwritten signature in dark ink, appearing to read 'GK Flynn', written over a horizontal line.

Gardner K Flynn, Jr
Engineering/Operations
Consultant



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

1875 New Hope Street
Norristown, PA 19401
215 270-1975

ORIGINAL
(Red)

June 9, 1987

Sidney S. Levy, President
Metro Container Corporation
2nd and Price Streets
Trainer, PA 19013

Re: Industrial Waste
Metro Contrainer Corporation
Trainer Borough
Delaware County

Dear Mr. Levy:

This is to confirm the results of my inspection conducted on March 5, 1987 which revealed the same continuous violations with respect to excessive chemical spillage near the wastewater treatment plant, holding tank, and drum storage resulting from uncovered and overturned drums spilling paints and chemical sludges. These areas should be cleaned and all contaminated soils, including dirt by holding tank, should be removed and properly disposed.

Such conditions are in violation of Title 25, Chapter 101, Section 101.3 of the Rules and Regulations of the Department of Environmental Resources regarding potential pollution. Consequently, you are in violation of the Clean Streams Law, the Act of June 22, 1937, P.L. 1987, as amended and subject to the penalties provided therein.

Notify this office in writing no later than June 30, 1987 of the action you have taken to comply, the date compliance was accomplished and the steps you have taken to prevent a recurrence of the violation.

Should these conditions continue further enforcement action will follow.

In addition to the aforementioned, please submit a report on the status of your investigation of the two (2) seeps at the base of the rear property.

If you have any questions, please feel free to contact me.

Very truly yours,

RUTH M. PLANT
Water Quality Specialist

cc: Brian Boyd, Ridley Creek Office
EPA (Attn: 3WM52)
Compliance and Monitoring Section
Re 30 (BJO)160.16



STEARNS CATALYTIC CORPORATION

ORIGINAL
(Red)

04/21/86

Mr. Gardner Flynn
P.O. Box 1424
Malvern, Penna. 19355

Subject: C.I. Contract No. 99978
Mr. Gardner Flynn
LABORATORY ANALYSIS

Dear Mr. Flynn:

Attached is the analytical report for samples
submitted to us 03/26/86.

The samples "as received" were handled as described
in the report and the the reporting basis is noted.

If there are any questions, please do not hesitate
to contact me (215) 485-5377 or Joe Watt (215) 864-8542.

Very truly yours,

William F. Cowen, PhD.
Senior Analytical Chemist

ORIGINAL
(Red)Stearns
Catalytic

1864

Page No. 1
04/21/86

STEARNS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE ANALYSIS STARTED	DATE ANALYSIS COMPLETED
10952	EFFLUENT WATER 03/26/86	AA Cd	TOTAL	ND(0.01 mg/l)	03/27/86	03/27/86
10952	EFFLUENT WATER 03/26/86	AA Cr	TOTAL	ND(0.05 mg/l)	04/02/86	04/02/86
10952	EFFLUENT WATER 03/26/86	AA Pb	TOTAL	ND(0.03 mg/l)	03/31/86	03/31/86
10952	EFFLUENT WATER 03/26/86	CHLORIDE		67 mg/l	04/11/86	04/11/86
10952	EFFLUENT WATER 03/26/86	CN-		ND(0.02 mg/l)	03/31/86	04/01/86
10952	EFFLUENT WATER 03/26/86	COO		22 mg/l	03/28/86	03/28/86
10952	EFFLUENT WATER 03/26/86	FOG		7 mg/l	04/02/86	04/03/86
10952	EFFLUENT WATER 03/26/86	NH3-N		ND(0.6 mg/l)	03/27/86	03/28/86
10952	EFFLUENT WATER 03/26/86	PHENOLICS		0.2 mg/l	03/31/86	04/02/86
10952	EFFLUENT WATER 03/26/86	SULFATE		90 mg/l	04/11/86	04/11/86
10952	EFFLUENT WATER 03/26/86	T-PO4-P	TOTAL	0.15 mg/l	04/04/86	04/07/86
10952	EFFLUENT WATER 03/26/86	TDS		324 mg/l	04/01/86	04/03/86
10952	EFFLUENT WATER 03/26/86	TOC		2.0 mg/l	04/08/86	04/08/86
10952	EFFLUENT WATER 03/26/86	pH		5.6 units	03/26/86	03/26/86
10953	EFFLUENT WATER 03/26/86	AA Cd	TOTAL	ND(0.01 mg/l)	03/27/86	03/27/86
10953	EFFLUENT WATER 03/26/86	AA Cr	TOTAL	0.13 mg/l	04/02/86	04/02/86
10953	EFFLUENT WATER 03/26/86	AA Pb	TOTAL	ND(0.03 mg/l)	03/31/86	03/31/86
10953	EFFLUENT WATER 03/26/86	CHLORIDE		1,310 mg/l	04/11/86	04/11/86
10953	EFFLUENT WATER 03/26/86	CN-		6.74 mg/l	03/31/86	04/01/86
10953	EFFLUENT WATER 03/26/86	COO		6,617 mg/l	03/28/86	03/28/86
10953	EFFLUENT WATER 03/26/86	FOG		90 mg/l	04/02/86	04/03/86
10953	EFFLUENT WATER 03/26/86	NH3-N		3.9 mg/l	03/27/86	03/28/86
10953	EFFLUENT WATER 03/26/86	PHENOLICS		27.5 mg/l	03/31/86	04/02/86
10953	EFFLUENT WATER 03/26/86	SULFATE		89 mg/l	04/11/86	04/11/86
10953	EFFLUENT WATER 03/26/86	T-PO4-P	TOTAL	43.2 mg/l	04/04/86	04/07/86
10953	EFFLUENT WATER 03/26/86	TDS		13,744 mg/l	04/01/86	04/03/86
10953	EFFLUENT WATER 03/26/86	TOC		1,975 mg/l	04/08/86	04/08/86
10953	EFFLUENT WATER 03/26/86	pH		7.6 units	03/26/86	03/26/86

ND = Not Detected (value reported is limit of detection)

APPROVED BY:

*William F. Cowen*WILLIAM F. COWEN, PhD
SENIOR ANALYTICAL CHEMIST



STEARNS CATALYTIC CORPORATION

ORIGINAL
(Red)

04/24/86

Mr. Gardner Flynn
P.O. Box 1424
Malvern, Penna. 19355

Subject: C.I. Contract No. 99978
Mr. Gardner Flynn
LABORATORY ANALYSIS

Dear Mr. Flynn:

Attached is the analytical report for samples
submitted to us 03/26/86.

The samples "as received" were handled as described
in the report and the the reporting basis is noted.

If there are any questions, please do not hesitate
to contact me (215) 485-5377 or Joe Watt (215) 864-8542.

Very truly yours,

William F. Cowen, PhD.
Senior Analytical Chemist

1863

Page No. 1
04/24/86

STEARNS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE ANALYSIS STARTED	DATE ANALYSIS COMPLETED
10952	EFFLUENT WATER 03/26/86	GC/MS VOA		SEE ATTACHED	03/26/86	04/23/86
10953	EFFLUENT WATER 03/26/86	GC/MS VOA		SEE ATTACHED	03/26/86	04/23/86

ND = Not Detected (value reported is limit of detection)

APPROVED BY

William F. Cowen

WILLIAM F. COWEN, PhD

SENIOR ANALYTICAL CHEMIST

ORIGINAL
(Red)

QUALITY ASSURANCE DATA
SURROGATE PERFORMANCE/RECOVERY
WATER MATRIX - GC/MS DATA

CLIENT: Stearns CatalyticCENTURY SAMPLE I.D.: E4537PROJECT: Metro ContainerCLIENT I.D.: Marcus Hook 10952 3/26/86

<u>COMPOUND SURROGATE</u>	<u>AMT</u>	<u>AMT</u>	<u>%</u>	<u>CONTROL LIMITS *</u>	
	<u>ADDED (ug)</u>	<u>RECOVERED (ug)</u>	<u>RECOVERY</u>	<u>LOWER</u>	<u>UPPER</u>
VOLATILE FRACTION					
Toluene-d8	.150	.143	95	86	119
Bromofluorobenzene	.150	.135	90	85	121
Ethyl Benzene-d-10	.150	.145	97	77	120
1,2-Dichloroethane-d-4	.150	.132	88	80	120

D FRACTION					
Phenol-d5	100			15	103
2-Fluorophenol	100			23	121
2,4,6-Tribromophenol	100			10	130

BASE NEUTRAL FRACTION

Nitrobenzene-d5	100			41	120
2-Fluorobiphenyl	100			44	119
Terphenyl-d14	100			33	128

*USEPA Control Limits

COMMENTS:

CLIENT: Stearns Catalytic

SAMPLE I.D. E5437

ORIGINAL
(Red)

CLIENT I.D.: Marcus Hook 10952

FRN NO.: C2236

VOLATILE ORGANIC COMPOUNDS

U.S.E.P.A. METHOD 624

PARAMETER	RESULTS (ug/l)
Acrolein	N.R.
Acrolonitrile	N.R.
Benzene	1 U
Bromodichloromethane	1 U
Bromoform	1 U
Bromomethane	2 U
Carbon Tetrachloride	1.0
Chlorobenzene	1 U
Chlorodibromomethane	1 U
Chloroethane	2 U
2-Chloroethyl vinyl ether	2 U
Chloroform	3.0
Chloromethane	2 U
1,2-Dichlorobenzene	1 U
1,3-Dichlorobenzene	1 U
1,4-Dichlorobenzene	1 U
1,1-Dichloroethane	1 U
1,2-Dichloroethane	1 U
1,1-Dichloroethene	1 U
trans-1,2-Dichloroethene	1 U
1,2-Dichloropropane	1 U
cis-1,3-Dichloropropene	1 U
Ethylbenzene	1 U
Fluorotrichloromethane	1 U
Methylene Chloride	1 U
1,1,2,2-Tetrachloroethane	1 U
Tetrachloroethene	1 U
Toluene	1 U
1,1,1-Trichloroethane	1 U
1,1,2-Trichloroethane	1 U
Trichloroethene	1 U
Vinyl Chloride	2 U
Xylenes	1 U

CLIENT: Stearns Catalytic

SAMPLE I.D. E4538

ORIGINAL
(Red)

CLIENT I.D.: Marcus Hook 10953A 3/26/86

FRN NO.: C2237

VOLATILE ORGANIC COMPOUNDS

U.S.E.P.A. METHOD 624

PARAMETER	RESULTS (ug/l)
Acrolein	N.R.
Acrolonitrile	N.R.
Benzene	50 U
Bromodichloromethane	50 U
Bromoform	50 U
Bromomethane	100 U
Carbon Tetrachloride	50 U
Chlorobenzene	50 U
Chlorodibromomethane	50 U
Chloroethane	100 U
2-Chloroethyl vinyl ether	100 U
Chloroform	50 U
Chloromethane	100 U
1,2-Dichlorobenzene	50 U
1,3-Dichlorobenzene	50 U
1,4-Dichlorobenzene	50 U
1,1-Dichloroethane	50 U
1,2-Dichloroethane	50 U
1,1-Dichloroethene	50 U
trans-1,2-Dichloroethene	50 U
1,2-Dichloropropane	50 U
cis-1,3-Dichloropropene	50 U
Ethylbenzene	50 U
Fluorotrichloromethane	50 U
Methylene Chloride	50 U
1,1,2,2-Tetrachloroethane	50 U
Tetrachloroethene	50 U
Toluene	50 U
1,1,1-Trichloroethane	50 U
1,1,2-Trichloroethane	50 U
Trichloroethene	50 U
Vinyl Chloride	100 U
Xylenes	50 U

QUALITY ASSURANCE DATA
SURROGATE PERFORMANCE/RECOVERY
WATER MATRIX - GC/MS DATA

ORIGINAL
(Red)

CLIENT: Stearns Catalytic

CENTURY SAMPLE I.D.: E4538

PROJECT: Metro Container

CLIENT I.D.: Marcus Hook 10953A 3/26/86

<u>COMPOUND SURROGATE</u>	<u>AMT</u>	<u>AMT</u>	<u>%</u>	<u>CONTROL LIMITS *</u>	
	<u>ADDED (ug)</u>	<u>RECOVERED (ug)</u>	<u>RECOVERY</u>	<u>LOWER</u>	<u>UPPER</u>
VOLATILE FRACTION					
Toluene-d8	.150	.139	93	86	119
Bromofluorobenzene	.150	.147	98	85	121
Ethyl Benzene-d-10	.150	.139	93	77	120
1,2-Dichloroethane-d-4	.150	.137	91	80	120

AROMATIC FRACTION					
Phenol-d5	100			15	103
2-Fluorophenol	100			23	121
2,4,6-Tribromophenol	100			10	130

BASE NEUTRAL FRACTION

Nitrobenzene-d5	100			41	120
2-Fluorobiphenyl	100			44	119
Terphenyl-d14	100			33	128

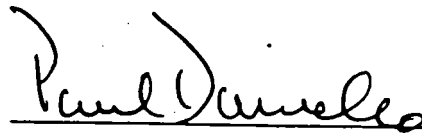
*USEPA Control Limits

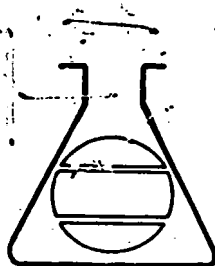
COMMENTS:

ORIGINAL
(Red)

NOTES AND COMMENTS:

- Value If the result is a value greater than or equal to the detection limit, report the value.
- U Compound was analyzed for but Not Detected.
The number is the minimum attainable detection limit for the sample.
- B This flag is used when the analyte is found in the blank as well as a sample. It indicates possible/probable blank contamination and warns the data user to take appropriate action.
- D Compound was detected but less than the minimum detection limit.


Laboratory Director



CENTURY LABORATORIES, INC.

P.O. Box 248/1501 Grandview Avenue/MidAtlantic Park, Thorofare, NJ 08086
Phone: (609) 848-3939 NJ 800-222-0589

ANALYSIS REPORT

NO. AA2690

ORIGINAL
(Red)

CERTIFICATE OF ANALYSIS

C
L
I
E
N
T

EMS RESOURCE GROUP, INC
SUITE 4, CONTINENTAL BUILDING
60 WEST GERMANTOWN PIKE
NORRISTOWN, PA 19401
ATTN: ROGER MCGUIGAN

LOG NUMBER

AA2690

SAMPLE IDENTIFICATION

Metro Sludge A2 & A3

SAMPLE RECEIVED 9/10/84

ANALYSIS COMPLETED 10/31/84

COLLECTED BY Client

RESULTS (mg/L unless specified)

TEST PARAMETER	AA2690	TEST PARAMETER	mg/kg AA2690
BOD ₅ *		Chlorine Demand	
COD		Chlorine Residual	
TOC		Chloride (CL)	
Dissolved Oxygen		Silica	
Suspended Solids		Petroleum HYC	
Total Solids	55.4%	Hardness (as CaCO ₃)	
Dissolved Solids			
Total Solids (ml/L)			
Phenols	5330	Aluminum	
Cyanide (Total)	0.32	Antimony	
Fluoride		Arsenic	3.2
Cyanide (Free)		Barium	
Surfactants (mg/L LAS)		Boron	
Oil & Grease (Freon) mg/kg	36891	Cadmium	33
Total Volatile Solids	16.3%	Calcium (Ca)	19800
Nitrogen (KJd as N)	310	Chromium (Total)	1160
Nitrogen (Ammonia as N)	82.5	Chromium (Hexa)	
Nitrogen (Organic as N)		Copper	400
Nitrite (N)		Iron	
Nitrate (N)	13	Lead	2850
Phosphate (P) Total	210	Magnesium (Mg)	2325
Phosphate (P) - Ortho		Manganese	
Sulfate (SO ₄)		Mercury	1.6
Sulfite (SO ₃)		Nickel	70
Sulfide		Potassium	780
Color		Selenium	
Turbidity (NTU)		Silver	
Conductivity (Micromohs)		Sodium	
Alk (Total) as CaCO ₃		Tin	
		Titanium	
Fecal Coliform		Zinc	435
Total Coliform			

* A minimum of 5 sample dilutions were used for this determination.

** Non-detectable, below the limit of detection.

LAB COMMENT:

Richard J. Lewis

CLIENT: E.M.S. RESOURCE GROUP
CLIENT ID: Metro Sludge A2 & A3

SAMPLE ID: AA2690
CHART NO. T100484-09

ORIGINAL
(Red)

VOLATILE ORGANIC COMPOUNDS

U.S.E.P.A. METHODS: 601 AND 602

Parameters	MDL* (mg/kg)	RESULTS (mg/kg)
Benzene	<1.0	N.D.
Bromodichloromethane	<1.0	N.D.
Bromoform	<1.0	N.D.
Bromomethane	<1.0	N.D.
Carbon Tetrachloride	<1.0	N.D.
Chlorobenzene	<1.0	N.D.
Chlorodibromomethane	<1.0	N.D.
Chloroethane	<1.0	N.D.
2-Chloroethyl vinyl ether	<1.0	N.D.
Chloroform	<1.0	N.D.
Chloromethane	<1.0	N.D.
1,2-Dichlorobenzene	<1.0	N.D.
1,3-Dichlorobenzene	<1.0	N.D.
1,4-Dichlorobenzene	<1.0	2.0
Dichlorodifluoromethane	<1.0	N.D.
1,1-Dichloroethane	<1.0	N.D.
1,2-Dichloroethane	<1.0	N.D.
1,1-Dichloroethene	<1.0	N.D.
trans-1,2-Dichloroethene#	<1.0	N.D.
1,2-Dichloropropane	<1.0	N.D.
cis-1,3-Dichloropropene	<1.0	N.D.
trans-1,3-Dichloropropene	<1.0	N.D.
Ethylbenzene	<1.0	N.D.
Fluorotrichloromethane	<1.0	N.D.
Methylene chloride	<1.0	N.D.
1,1,2,2-Tetrachloroethane	<1.0	N.D.
Tetrachloroethene	<1.0	N.D.
Toluene	<1.0	13
1,1,1-Trichloroethane	<1.0	N.D.
1,1,2-Trichloroethane	<1.0	N.D.
Trichloroethene	<1.0	N.D.
Vinyl chloride	<1.0	N.D.

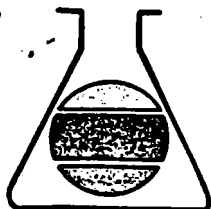
*MDL = MINIMUM DETECTION LEVEL

BMDL = PRESENT BUT BELOW MINIMUM DETECTION LEVEL

#cis-1,2-Dichloroethene (a non-targetted compound) coelutes with trans-1,2-Dichloroethene and the GC (or GC/MS) cannot distinguish one from the other.

It is recommended that all positive identifications be confirmed by GC/MS analysis.

Richard W. Kymel
LAB DIRECTOR



CENTURY LABORATORIES, INC.

P.O. Box 248/1501 Grandview Avenue/MidAtlantic Park, Thorofare, NJ 08086
Phone: (609) 848-3939 NJ 800-222-0589

ORIGINAL
(Red)

EMS RESOURCE GROUP, INC

CLIENT: SUITE 4, CONTINENTAL BUILDING
60 WEST GERMANTOWN PIKE
NORRISTOWN, PA 19401
ATTN: ROGER MCGUIGAN

ANALYSIS NO: AA2690

SAMPLE DATE: 9/10/84

ANALYSIS DATE: 10/15/84

CHART NO: TH-565-101684-05

SE-2-101584-04

SE-1-101584-05

Sample I.D.: Sludge

CERTIFICATE OF ANALYSIS

<u>PARAMETER</u>	<u>RESULTS (ug/kg)</u>
Aldrin	N.D.
g-BHC (Lindane)	N.D.
Chlorodane	N.D.
4,4'-DDD	N.D.
4,4'-DDE	N.D.
4,4'-DDT	N.D.
Dieldrin	N.D.
Endrin	N.D.
Mirex	N.D.
Heptachlor	N.D.
Heptachlor Epoxide	N.D.
Methoxychlor	N.D.
Toxaphene	N.D.
Total PCB's mg/kg	N.D.

Richard W. Ryan
Lab Director

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

Metro

INSPECTION REPORT
TRANSFER STATIONS, INCINERATORS,
COMPOSTING FACILITIES, PROCESSING PLANTS
FORM NO. 11

ORIGINAL
(Red)

IDENTIFICATION NUMBER (1-7) <i>400514</i>		INSPECTION DATE (9-14) <i>Aug. 12, 1987</i>	INSPECTORS SOC. SEC. NO. (16-24) <i>F.S. 301</i>
NAME OF DISPOSAL FACILITY <i>Metro Containers Co. Second & Pine Sts. Trainer, Pa. 19013</i>		FACILITY ADDRESS	
MUNICIPALITY <i>Trainer</i>		COUNTY <i>Delaware</i>	
FACILITY PROPRIETOR (NAME, ADDRESS & TELEPHONE NUMBER) <i>Henry Levy Second & Pine Sts. Trainer, Pa. 19013</i>			
DAILY VOLUME RECEIVED <i>1000 - volume</i>		ANNUAL REPORT RECEIVED	DAYS PER WEEK OPERATED <i>5</i>

1 - Compliance, 2 - Non-Compliance, 3 - Non-Applicable

CHAPTER CITATION		1	2	3
26 75.21(m)(3)	Suitable barrier blocks access to site when attendant is not present	✓		
27 75.21(b)(1), (2), (3)	Adequate fire equipment or procedure for minimizing fire hazard	✓		
28 75.21(i)	Site access roads are negotiable by loaded vehicles	✓		
29 75.21(q)	Approved operational safety program being utilized	✓		
30 75.21(m)(2)	Hours of operation prominently posted			✓
31 75.21(k)	Telephone or other communications available	✓		
32 75.21(o)(1)	Salvaging occurs in accordance with regulations			
33 75.21(r)(1), (2), (3), (4)	Operational records maintained and method of measurement provided			
34 75.21(p)	Effective vector control program utilized at site where needed. Circle vector program required: bird, mosquito, rodent, fly			
35 75.27(q), 75.30(m) & 75.34(d)(5)	Dust controlled at site			
36 75.27(l), 75.30(i) & 75.34(d)(10)	Bulky wastes properly controlled			
37 75.27(r), 75.30(h) & 75.34(c)(13)	Residues or effluents collected and properly disposed of			
38 75.27(i), 75.30(m) & 75.34(d)(11), (15)	All areas of building/equipment properly maintained			
39 75.27(f), 75.30(n) & 75.34(d)(11)	Plumbing properly maintained, floors free of standing water			

**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT**

**INSPECTION REPORT
TRANSFER STATIONS, INCINERATORS,
COMPOSTING FACILITIES, PROCESSING PLANTS
FORM NO. 11**

ORIGINAL
(Red)

1 - Compliance, 2 - Non-Compliance, 3 - Non-Applicable

CHAPTER CITATION		1	2	3
40	75.27(m) & 75.34(d)(2)	Provisions for standby equipment available when needed		
41	75.27(e), 75.30(m) & 75.34(d)(12)	Unloading area adequate and secure		
42	75.27(m), 75.30(b) & 75.34(d)(2)	Emergency operational plan available		
43	75.27(b), 75.30(g) & 75.34(d)(9)	Waste storage facilities adequate and secure		
44	75.27(d), 75.30(i) & 75.34(d)(8)	Operation manual available		
45	75.27(o), 75.34(d)(4) & 75.30(m)	Open burning of waste prohibited		
46	75.27(h), (i), 75.30(m) & 75.34(d)(7)	Blowing litter controlled		
47	75.27(f), 75.30(h) & 75.34(d)(12)	Monitoring systems and monitoring data requirements met		
48	75.27(m) & 75.30(d)	Wastes accepted as approved by the Department		
49	75.27(k), 75.30(m) & 75.34(d)(14)	Has vegetative growth been established to prevent soil erosion on disturbed areas		
50	75.27(m), 75.30(i) & 75.34(d)(8)	Operation in accordance with permit conditions and approved design plans		

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

INSPECTION REPORT
SANITARY LANDFILL, INDUSTRIAL SITES
DEMOLITION SITES, FLYASH SITES, SLAG SITES

COMMENTS:
FORM NO. 10, 11, & 12

ORIGINAL
10/1/87

DISPOSAL FACILITY Metro Container
Open-hear! Drum incinerator
DATE August 18, 1987

During the August 18, 1987 inspection, the following violations were observed:

1. Incinerator area should be maintained in a cleaner manner. Residues should be kept off of the floor.
2. Standing water should not exist on the floor. The water had an oily sheen on it. Floors should be maintained and cleaned daily.
3. Residue storage container should be "taped" when not in use.

Alan B. [Signature]
Department of Environmental Resources Representative

N/A
Operator

APPLICANT, INSPECTOR, REGIONAL OFFICE

HAZARDOUS WASTE INSPECTION REPORT
Generators - Part A

ORIGINAL
(Red)

Date of inspection August 18, 1987 Time start 1:00 Time finish 3:30
Name of inspector Brian Boyd
Company, installation name Metro Container Corp
Location Second & Price Sts. Trainer, Pa 19013
County Delaware Municipality Trainer Boro
Identification number PADO44545895
Name of responsible official Sidney Levy
Title President
Mailing address Second & Price Sts. Trainer, Pa 19013
Area code and phone no. (315) 485-6110
Name of person interviewed Terry Butler, Sidney Levy
Title Operations manager, President
Mailing address (if different from above) Same
Area code and phone no. _____

1. Current waste handling method: LQG + PBR facility
- a. ☒ On-site ☒ treatment, ☐ storage, ☐ disposal
b. ☐ On-site ☐ use, ☐ reuse, ☐ recycle, ☐ reclaim
c. ☒ Off-site ☐ treatment, ☐ storage, ☒ disposal
d. ☒ Off-site ☐ use, ☐ reuse, ☒ recycle, ☐ reclaim

2. Amount of hazardous waste produced:

- a. Unknown kg./mo.
b. _____ kg./yr.

3. Types of hazardous waste produced by Hazardous Waste Number:

Corrosives
Flammables

4. Are hazardous wastes transported off-site by the generator? ☐ Yes ☒ No

Date of Inspection August 18, 1987 Identification Number PAD041545-895
Company, Installation Name Metro Container Co.
County Delaware Municipality Trainer Boro

At the time of this inspection, the following items were observed:

- 1) Wastewater treatment process holding tank has overflowed onto the ground surface.
- 2) Wastewater treatment process holding tank has no secondary impervious containment.
- 3) The oil removal area of the wastewater treatment system has repeatedly overflowed onto the ground surface.
- 4) The general housekeeping is non-existent.
- 5) A blue PVC (1ft Diameter) pipe was discharging an aqueous liquid at approx. 5 gallons/min into Stony Creek. This discharge is supposedly for surface water runoff only. There has been no rain for several days.
- 6) Hazardous waste Determinations on all waste streams have not been submitted to Dept. as requested. Mr. Levy has assured me that they will be completed within the next few weeks.
- 7) Disposal of hazardous wastes is occurring without a permit. Paint filters from the booth are being burned in the incinerator.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Solid Waste Management, inspected the above installation. Findings of this inspection are shown in this report. Any violations which were uncovered in the inspection are indicated. Violations may also be discovered upon examination of results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Interviewed (signature) B. K. B... Date 8/15/87
Inspector (signature) B. K. B... Date 8/15/87

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

INSPECTION REPORT
SANITARY LANDFILL, INDUSTRIAL SITES
DEMOLITION SITES, FLYASH SITES, SLAG SITES

COMMENTS:
FORM NO. 10, 11, & 12

ORIGINAL
(Red)

DISPOSAL FACILITY Metro Container
Corp. - Incinerator
DATE 4/27/87

During the current (4/27/87) inspection
the following was observed:

- the roll-off container holding the
incinerator ash should be covered
when not in use.

Note - the entire incinerator area is
considerably cleaner and has been properly
maintained since last inspection.

Brian K. Boyd
Department of Environmental Resources Representative

Burt A. McJannet
Operator

**DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
INSPECTION REPORT
TRANSFER STATIONS, INCINERATORS,
COMPOSTING FACILITIES, PROCESSING PLANTS
FORM NO. 11**

IDENTIFICATION NUMBER (1-7)		INSPECTION DATE (9-14) <i>April 27, 1987</i>	INSPECTOR'S SOC. SEC. NO. (18-24) <i>B. Boyd</i>
NAME OF DISPOSAL FACILITY <i>Metro Container Co.</i>		FACILITY ADDRESS <i>2nd + Price Sts</i>	
MUNICIPALITY <i>Trainer</i>		COUNTY <i>Delaware</i>	
FACILITY PROPRIETOR (NAME, ADDRESS & TELEPHONE NUMBER) <i>Sidney Levy 2nd + Price Sts. Trainer, Pa.</i>			
DAILY VOLUME RECEIVED <i>rum incinerator - volume varies</i>		ANNUAL REPORT RECEIVED	DAYS PER WEEK OPERATED <i>5</i>

1 - Compliance, 2 - Non-Compliance, 3 - Non-Applicable

CHAPTER CITATION		1	2	3
26 75.21(m)(3)	Suitable barrier blocks access to site when attendant is not present	<input checked="" type="checkbox"/>		
27 75.21(b)(1), (2), (3)	Adequate fire equipment or procedure for minimizing fire hazard	<input checked="" type="checkbox"/>		
28 75.21(i)	Site access roads are negotiable by loaded vehicles	<input checked="" type="checkbox"/>		
29 75.21(q)	Approved operational safety program being utilized	<input checked="" type="checkbox"/>		
30 75.21(m)(2)	Hours of operation prominently posted			<input checked="" type="checkbox"/>
31 75.21(k)	Telephone or other communications available	<input checked="" type="checkbox"/>		
32 75.21(o)(1)	Salvaging occurs in accordance with regulations	<input checked="" type="checkbox"/>		
33 75.21(r)(1), (2), (3), (4)	Operational records maintained and method of measurement provided	<input checked="" type="checkbox"/>		
34 75.21(p)	Effective vector control program utilized at site where needed. Circle vector program required: bird, mosquito, rodent, fly	<input checked="" type="checkbox"/>		
35 75.27(q), 75.30(m) & 75.34(d)(5)	Dust controlled at site	<input checked="" type="checkbox"/>		
36 75.27(i), 75.30(i) & 75.34(d)(10)	Bulky wastes properly controlled	<input checked="" type="checkbox"/>		
37 75.27(r), 75.30(h) & 75.34(c)(13)	Residues or effluents collected and properly disposed of			
38 75.27(i), 75.30(m) & 75.34(d)(11), (15)	All areas of building/equipment properly maintained	<input checked="" type="checkbox"/>		
9 75.27(f), 75.30(n) & 75.34(d)(11)	Plumbing properly maintained, floors free of standing water	<input checked="" type="checkbox"/>		

41	75.27(a)(1), 75.30(a)(1) & 75.34(a)(12)	Emergency operational plan available	✓		
42	75.27(a)(1), 75.30(a)(1) & 75.34(a)(12)	Water storage facilities adequate and secure			✓
43	75.27(a)(1), 75.30(a)(1) & 75.34(a)(12)	Operation manual available	✓		
44	75.27(a)(1), 75.30(a)(1) & 75.34(a)(12)	Open burning of water prohibited	✓		
45	75.27(a)(1), 75.30(a)(1) & 75.34(a)(12)	Flowing litter controlled	✓		
46	75.27(a)(1), 75.30(a)(1) & 75.34(a)(12)	Monitoring systems and monitoring data requirements met	✓		
47	75.27(a)(1) & 75.30(a)(1)	Wastes accepted as approved by the Department	✓		
48	75.27(a)(1), 75.30(a)(1) & 75.34(a)(12)	Has vegetative growth been established to prevent soil erosion on disturbed areas			✓
49	75.27(a)(1), 75.30(a)(1) & 75.34(a)(12)	Operation in accordance with permit conditions and approved design plans	✓		



240-1946
Jim Unusky

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
1875 New Hope Street
Norristown, PA 19401
215 270-1923
1610



15 days 11:24
4/23

April 18, 1984

Metro Container Corporation
P. O. Box A
Second and Price Streets
Trainer, PA 19013

Attention: Mr. Sidney Levy
President

Re: Application No. 23-301-100
Trainer Borough
Delaware County

Gentlemen:

This will acknowledge receipt of your application on April 11, 1984 for approval to construct a drum reclaiming furnace to burn off the coating material on the drums at your plant in Trainer Borough, Delaware County.

The material submitted is deficient with respect to the following:

1. Estimated emissions from this furnace.
2. The various coatings on the drum.
3. A schematic of the process.

Please submit supplementary or revised material covering the above within fifteen (15) days from the date of this letter or we will have to return the application.

In addition to the above, a permit from our dams and waterway management program may be required if construction of the furnace occurs within 50 feet of Story Creek. A solid waste permit is also required. Please submit four copies of the enclosed forms to our solid waste management program.

All applications must be submitted as soon as possible so that they can be processed concurrently. No permits will be issued until processing is completed on all required applications. The permits will be issued simultaneously from this office.

Metro Container Corporation

April 18, 1984

- 2 -

ORIGINAL
(Red)

Please contact Edward Bender, Hydraulic Engineer, 270-1936, if you have any questions concerning the encroachment requirements. If there are any questions regarding the solid waste requirements, please contact Lawrence H. Lusk, Solid Waste Regional Facilities Supervisor, at 270-1920.

You are reminded that any proposed facilities cannot be constructed without first obtaining the required permits.

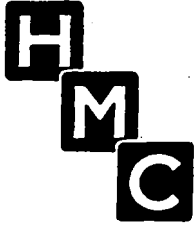
Very truly yours,



LEON T. GONSHOR
Regional Director

cc: Air Quality Control
Dams and Waterway Management
Solid Waste Management
Trainer Borough
Re FR5-111

ENCLOSURES



HEAT MACHINERY CORPORATION

Engineers and Builders of Industrial Process Equipment

ORIGINAL
(Red)

FURNACES . OVENS . WASHERS . AIR HEATERS . MATERIAL HANDLING SYSTEMS . SPECIAL PRODUCTION EQUIPMENT

4915 VAN EPPS ROAD

CLEVELAND, OHIO 44131

(216) 749-2010

April 23, 1984

Commonwealth of Pennsylvania
Dept. of Environmental Resources
1875 New Hope Street
Norristown, PA 19401

Attention: Mr. Phillip Bedein, P.E.

Subject: Metro Container Corp.
Your letter dated April 16, 1984

Gentlemen,

The information you requested is as follows:

1. The estimated emissions. The standard parameter for design of these furnaces is based on #6 fuel oil as the waste being processed. This would not emit any emissions other than products of combustion. Other material will be processed in this furnace and the emissions can only be estimated using #6 oil as a guide line for design.

2. Name of company in Pine Barrens, N.J. with similar furnace.

Enterprise Steel Drum
New Freedom - New Brooklyn Rd.
Berlin, N.J. 08009

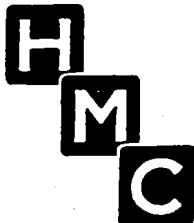
Note: Plant was sold. We are not sure of new companies name.

3. How was 345 acfs, 27606 acfm and 12,133 scfm obtained.

Referring to Drawing D-2371. (Additional copy enclosed)

a. 345 acfs is the result of adjusting total scfm to
1400 Degrees F (20,728 acfm) to acfs (345)

Cont'd On Page Two



HEAT MACHINERY CORPORATION

Engineers and Builders of Industrial Process Equipment

ORIGINAL
(Red)

FURNACES - OVENS - WASHERS - AIR HEATERS - MATERIAL HANDLING SYSTEMS - SPECIAL PRODUCTION EQUIPMENT

4915 VAN EPPS ROAD

CLEVELAND, OHIO 44131

(216) 749-2010

- 2 -

- b. 27606 is fan manufacturers' rating at given speed and pressure. Copy of table enclosed.
- c. 12,133 scfm is total scfm including the dilution air being handled by the fan.

If further information is required, please feel free to contact us.

Very truly yours,

HEAT MACHINERY CORPORATION


Nelson C. Strimple

cc. Jay Zuck, Metro Container



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

1875 New Hope Street
Norristown, PA 19401
215 270-1948



April 16, 1984

Mr. Nelson C. Strimple
Heat Machinery Corporation
4915 Van Epps Road
Cleveland, OH 44131

Re: Metro Container Corporation
Trainer, PA

Dear Mr. Strimple:

We are processing the application for the construction of your Drum Reclamation Furnace for the above company.

Please send us information on the following:

1. The estimated emissions.
2. The name and address of the company in Pine Barrens, NJ that has a similar furnace.
3. How ^{did} you obtained 345 acfs, 27,606 acfm and 12,133 scfm.

Sincerely,

Phillip Bedein

PHILLIP BEDEIN, P.E.
Air Pollution Control Engineer

Re 30.4W 107.7

E. M. S. Resource Group, Inc.

ENGINEERING & MANAGEMENT CONSULTANTS

ORIGINAL
(Red)

SUITE 4, CONTINENTAL BUILDING
60 WEST GERMANTOWN PIKE
NORRISTOWN, PA. 19401
215 272-5920

84B-007

May 29, 1984

Metro Enterprise Container Corporation
Second & Price Streets
Trainer, PA 19013

Attention: Mr. Sidney Levy
President

Subject: D.E.R. Application Openhead Plant

Dear Sid:

Attached herewith is a completed application for the above-referenced project. This application is ready for your submission to Pennsylvania Department of Environmental Resources. You must submit four (4) copies to D.E.R. at the following address:

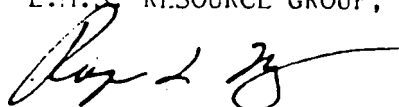
1875 New Hope Street
Norristown, PA 19401

D.E.R. will be in touch regarding the necessary filing fees.

In accordance with the new act of State legislation, you will also have to submit one (1) copy of the application, certified mail, to the Borough of Trainer, for verification to D.E.R. that the Borough of Trainer received a copy of the application.

If you have any questions concerning this matter, please do not hesitate to contact our office.

Very truly yours,
E.M.S. RESOURCE GROUP, INC.



Roger L. McGuigan, P.E.
President, Engineering Group

Enclosure

RLM/amr

DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

DATE PREPARED

May 24, 1984

SOLID WASTE PROCESSING FACILITIES
AND TRANSFER STATIONS

FORM NO. 3

PHASE II

ORIGINAL
I. D. NUMBER

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PREPARED BY (NAME & ADDRESS, TELEPHONE NO.)

Roger L. McGuigan, P.E., E.M.S. RESOURCE GROUP, INC., Suite 4, 60 W. Germantown Pike
Norristown, PA 19401

PART I

A. SITE INFORMATION

- NAME OF SITE Metro Enterprise Container Corp.
- ADDRESS OF SITE Second & Price Streets
Trainer, PA 19013
- OWNER OF RECORD (NAME & ADDRESS & TELEPHONE NO.) Metro Enterprise Container Corp.
Second & Price Streets
Trainer, PA 19013
215-627-7288

PART I - SOLID WASTE CHARACTERISTICS

SOURCE, TYPE, AND VOLUME OF WASTES (CHECK THE SOURCE AREA, GIVE A BRIEF DESCRIPTION OF THE TYPE OF PRESENT WASTE AND ANNUAL PROJECTED VOLUME) SUBJECT CHEMICAL ANALYSIS OF HAZARDOUS WASTES WHICH ARE PROPOSED TO BE ACCEPTED. THE ANALYSIS SHALL BE CONDUCTED BY A DEPARTMENT APPROVED PROCEDURE.

B. SOURCE	TYPE (DESCRIPTION)	PRESENT VOL.-TONS CU.YDS. OR GALLONS/YR	PROJECTED VOL.-TONS CU.YDS. OR GALLONS/YR
1. RESIDENTIAL			
2. COMMERCIAL			
3. INDUSTRIAL	ASH		20 cu.yds./month 240 tons/year
4. AGRICULTURAL			
5. OTHER (EXPLAIN)			

ADDITIONAL COMMENTS ON SOURCE, TYPE, AND VOLUME OF WASTE

Waste ASH consists of paint residuals from burning paint from exterior open top drums. Drums are rehabilitated.

C. DAILY WASTE QUANTITIES (INDICATE AMOUNT OF WASTE THE FACILITY WILL ACCEPT EACH DAY, STATED IN VOLUME OR WEIGHT STATED IN SAME UNITS AS ABOVE)

- MAXIMUM DAILY VOLUME OR WEIGHT 1 cu.yd. Waste generated by Production Facilities.
No. wastes brought to site.

DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

SOLID WASTE PROCESSING FACILITIES
AND TRANSFER STATIONS
SOLID WASTE FORM NO. 3
PHASE II

DATE PREPARED

May 24, 1984

ORIGINAL
(Red)

I. D. NUMBER

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C. DAILY WASTE QUANTITIES (cont.)

2. MINIMUM DAILY VOLUME OR WEIGHT 0
3. AVERAGE DAILY VOLUME OR WEIGHT 1 cu.yd. (See comment)

PART II - PROCESSING DESIGN AND OPERATION
(IF NOT APPLICABLE, INDICATE BY MARKING ITEM N/A)

D. DETAILED PLANS AND MAPS OF SITE

SUBMIT ALL PLANS AND DOCUMENTS IN TRIPLICATE. THE FRONT COVER OR FLYLEAF OF EACH SET OF DRAWINGS AND SPECIFICATIONS MUST BEAR THE SIGNATURE AND SEAL OF THE REGISTERED PROFESSIONAL ENGINEER. EACH DRAWING MUST BEAR AN IMPRINT OR REASONABLE FACSIMILE OF SUCH SEAL.

1. PROPERTY LINE MAP

- A. INDICATE PROPERTY LINES OF SITE, USE OF ADJACENT PROPERTIES, AND SHOW ALL RIGHT-OF-WAYS (FUEL AND POWER LINES, ROADS, ETC.)

(1) IF RIGHT-OF-WAYS EXIST, NAME OF OWNER/COMPANY, USE None

(2) DOES OWNER OR OPERATOR OWN MINERAL RIGHTS? Yes

1. IS THERE MINEABLE COAL BENEATH THE FACILITY

2. IF YES, WOULD FACILITY BE AFFECTED BY MINING

(3) IF NOT, NAME AND ADDRESS OF OWNER OF MINERAL RIGHTS

2. DETAILED TOPOGRAPHIC MAP(S) OF SITE MUST INCLUDE THE FOLLOWING:
(MORE THAN ONE MAP MAY BE USED TO SHOW THE REQUIRED INFORMATION LISTED BELOW)

- A. SCALE (1:200' OR LARGER, MEANING RATIO LARGER THAN .005) X
- B. 10' CONTOUR INTERVAL X
- C. LOCATION OF ACCESS ROADS X
- D. LOCATION OF FENCING X
- E. WEIGHING AND MEASURING FACILITIES, IF ANY X
- F. LOCATION OF EXISTING AND PROPOSED UTILITIES X - Proposed
- G. LOCATION AND IDENTITY OF IMPOUNDMENTS, STREAMS, AND WATER SUPPLIES ON ADJACENT PROPERTIES X

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENTSOLID WASTE PROCESSING FACILITIES
AND TRANSFER STATIONS

FORM NO. 3

PHASE II

ORIGINAL
(Red)

I. D. NUMBER

DATE PREPARED

May 24, 1984

E. OPERATIONAL PLANS

(FOR DETAILED REQUIREMENTS SEE CHAPTER 75, RULES & REGULATIONS)

1. CLASSIFICATION OF PROCESS - CHECK APPLICABLE ITEM

(a) GAS CLEANING

- ☐ MECHANICAL COLLECTION
- ☐ ELECTROSTATIC PRECIPITATION
- ☐ FABRIC FILTER
- ☐ WET SCRUBBING
- ☐ ACTIVATED CARBON ABSORPTION
- ☐ ADSORPTION

(b) LIQUID - SOLIDS SEPARATION

- ☐ CENTRIFUGATION
- ☐ CLARIFICATION
- ☐ COAGULATION
- ☐ FILTRATION
- ☐ FLOCCULATION
- ☐ FLOTATION
- ☐ FOAMING
- ☐ SEDIMENTATION
- ☐ THICKENING

(c) REMOVAL OF SPECIFIC COMPONENTS

- ☐ ABSORPTION
- ☐ CRYSTALLIZATION
- ☐ DIALYSIS
- ☐ DISTILLATION
- ☐ ELECTRODIALYSIS
- ☐ EVAPORATION
- ☐ LEACHING
- ☐ REVERSE OSMOSIS
- ☐ SOLVENT EXTRACTION
- ☐ STRIPPING

(g) INCINERATION

TYPES AND RATED CAPACITY OF INCINERATOR North American Mfg. Co., #6422-4 (6,000,000 BTU input)TYPE OF AUXILIARY FUEL USED. Natural Gas

DESIGN SPECIFICATIONS

a. BURNING TEMPERATURES 1,000 - 1,200°F

(d) CHEMICAL TREATMENT PROCESSES

- ☐ ABSORPTION
- ☐ CHEMICAL OXIDATION
- ☐ CHEMICAL PRECIPITATION
- ☐ CHEMICAL REDUCTION
- ☐ COMBINATION AND ADDITION
- ☐ ION EXCHANGE
- ☐ NEUTRALIZATION
- ☐ PYROLYSIS

(e) BIOLOGICAL TREATMENT PROCESSES

- ☐ ACTIVATED SLUDGE
- ☐ AEROBIC LAGOONS
- ☐ SPRAY IRRIGATION
- ☐ TRICKLING FILTERS
- ☐ WASTE STABILIZATION PONDS

(f) PROCESSING

- ☐ COMPACTION
- ☐ BULK WASTE TRANSFER
- ☐ BULK CONTAINER TRANSFER
- ☐ SALVAGE
- ☐ SHREDDING
- ☐ AIR CLASSIFICATION
- ☐ OTHER

COMMONWEALTH OF PENNSYLVANIA
 DEPARTMENT OF ENVIRONMENTAL RESOURCES
 BUREAU OF SOLID WASTE MANAGEMENT

ORIGINAL
 (Red)

SOLID WASTE PROCESSING FACILITIES
 AND TRANSFER STATIONS

FORM NO. 3
 PHASE II

I. D. NUMBER

DATE PREPARED

May 24, 1984

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b. DWELL-TIME OF WASTE IN INCINERATOR. _____

c. STATUS OF CURRENT AIR POLLUTION PERMIT, SUBMIT DOCUMENTATION, PERMIT, OR PLAN APPROVAL Permit Pending

(h) ULTIMATE DISPOSAL PROCESSES

- ____ DEEP WELL DISPOSAL (BWQM PERMIT REQUIRED)
 ____ DILUTE AND DISPERSE
☒ INCINERATION
 ____ SANITARY LANDFILL
 ____ LAND BURIAL

2. DESIGN PLANS

FOR DETAILED REQUIREMENTS - SEE CHAPTER 75, RULES AND REGULATIONS

YES

NO

(a) ENGINEERING DRAWINGS OF PLANT AS BUILT AND UPDATED AVAILABLE ON PREMISE FOR REFERENCE BY OPERATIONAL AND MAINTENANCE PERSONNEL.

New Plant Not Yet Built.

(b) EQUIPMENT OPERATION AND MAINTENANCE MANUALS AVAILABLE FOR REFERENCE BY EMPLOYEES.

X (Copy attached and available)

(c) MANUAL DESCRIBING WRITTEN TASKS THAT MUST BE PERFORMED AS PART OF PROCESS.

X

(d) LOCATION OF TREATMENT FACILITIES.

None

(e) CROSS SECTIONS OF LAGOONS.

None

(f) PLANS AND CROSS SECTIONS OF STORAGE AREAS.

None

(g) PLANS OF FACILITIES DESIGNED TO PREVENT SPILLS OR LEAKAGE.

NA

(h) MONITORING SYSTEMS FOR SITE OR PROCESS.

NA

(i) PROVIDE A SCHEMATIC DIAGRAM OF THE PROCESS AND THE RELATED SUPPORT FACILITIES TO THE SYSTEM.

X

(j) PROVIDE A NARRATIVE TO DESCRIBE THE WORKINGS, FUNCTION, AND THE END PRODUCT OF THE PROCESS AND THE METHOD OF MANAGEMENT OF THE END PRODUCT OR ANY RESIDUALS FROM THE PROCESS. IF RESIDUE DISPOSAL IS PROPOSED ON-SITE, APPLICANT MUST SUBMIT REQUIRED LAND DISPOSAL FORMS AND MODULES FOR DISPOSAL AREA. IF DISPOSAL IS OFF-SITE AT A PERMITTED FACILITY, SOLID WASTE MODULE NO. 1 SHALL BE SUBMITTED.

X

(k) OPERATIONAL NARRATIVE FOR SITE AREA (DESCRIBE, CHECK AS COMPLETED)

1. BUILDING AND AREA SANITATION PROGRAM

X

2. SITE MAINTENANCE

X

3. COMMUNICATIONS

X

4. FIRE PROTECTION

X

5. MANAGEMENT OF SURFACE WATER AND EROSION CONTROL

NA

6. SALVAGE

NA

7. ACCESS AND TRAFFIC CONTROL

X

8. DUST CONTROL METHODS

NA

9. VECTOR CONTROL METHODS

NA

DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

SOLID WASTE PROCESSING FACILITIES
AND TRANSFER STATIONS

FORM NO. 3
PHASE II

ORIGINAL
(Red)

I. D. NUMBER

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DATE PREPARED

May 24, 1984

10. ACCIDENT PREVENTION AND SAFETY EQUIPMENT, LIST
11. AVAILABILITY OF PUBLIC UTILITIES
12. MANAGEMENT AND STORAGE OF BULKY WASTE
13. BREAKDOWN CONTINGENCY PLAN
14. STORAGE OF ACCUMULATIONS OF REUSABLE OR RESALABLE MATERIALS

X
X
NA
NA
X

F. ENGINEER

1. NAME Roger L. McGuigan

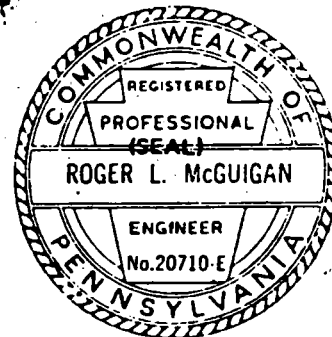
3. REGISTRATION NUMBER 20710 E

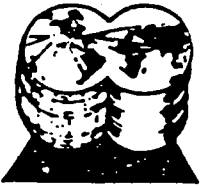
2. ADDRESS E.M.S. Resource Group, Inc.
Suite 4, 60 W. Germantown Pike
Norristown, PA 19401

4. SIGNATURE *Roger L. McGuigan*

TELEPHONE NUMBER 215-272-5920

5. SEAL OF REGISTERED PROFESSIONAL ENGINEER





Metro Container Corp

POST OFFICE BOX A SECOND & PRICE STREETS TRAINER, PENNSYLVANIA 19016
(215) 627-7288 TELEPHONES (215) 494-8200



May 7, 1984

Commonwealth of Pennsylvania
Department of Environmental Resources
1875 New Hope Street
Norristown, Pa. 19401

Re: Application No. 23-301-100
Trainer Borough
Delaware County

Gentlemen,

Reference your letter dated April 18, 1984 which was received by this office April 23rd 1984.

The following is the information requested by you.

1. The estimated emissions. The standard parameter for design of these furnaces is based on #6 fuel oil as the waste being processed. This would not emit any emissions other than products of combustion. Other material will be processed in this furnace and the emissions can only be estimated using #6 oil as a guide line for design.
2. Paint baking enamel on the exterior. Various linings (Epoxy-Heresite) on the interior. If you require additional information on the above, please advise.
3. Copy of the Schematic is enclosed. Should you require further information, please advise.

The application for Solid Waste Permit is being prepared by our engineer and will be submitted when complete.

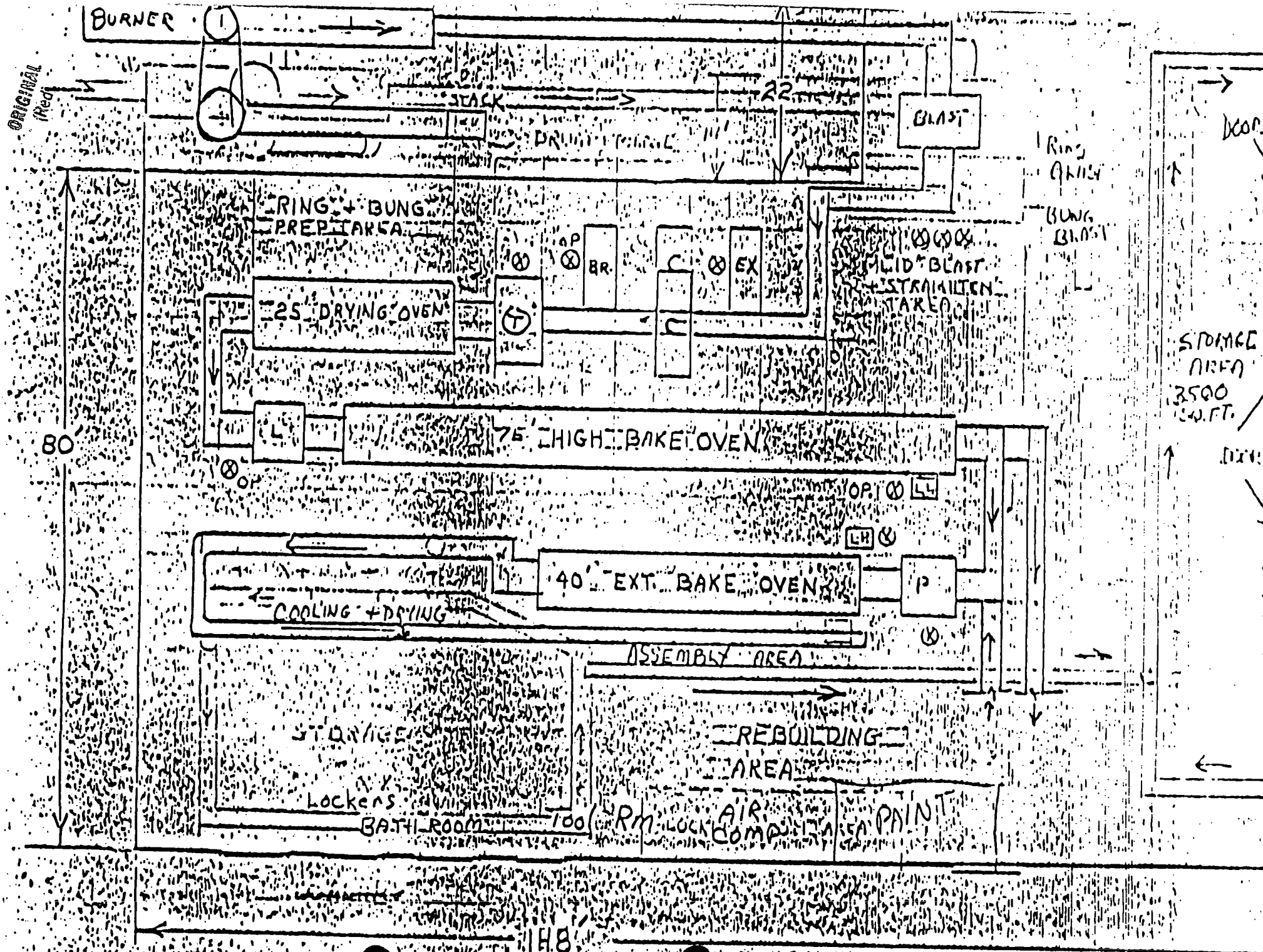
Very truly yours,

METRO CONTAINER CORPORATION

Sidney S. Levy

Sidney S. Levy

SSL/sk



E. M. S. Resource Group, Inc.

ENGINEERING & MANAGEMENT CONSULTANTS

ORIGINAL
(Red) ✓

TRANSMITTAL

SUITE 4, CONTINENTAL BUILDING
60 WEST GERMANTOWN PIKE
NORRISTOWN, PA. 19401
215 272-5920

Date June 8, 1984

TO Commonwealth of Pennsylvania
Dept. of Environmental Resources
Bureau of Solid Waste Management
Ridley Creek State Park
Sycamore Mills Road
Media, PA 19063
Attn: Robert Zang, Specialist

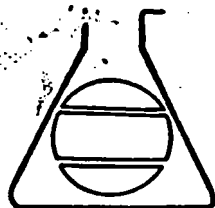
Project 83B-004

 Memo
 X Enclosure
 Separate Cover
 Approved
 Not Approved
 Approved as Noted
 Revise and Resubmit
 X For your Information and File
 Reply requested

Date	Copies	Title
05/16/84	1	Sample Analysis - A3425 & A3426

Copy to Sid Levy, Metro Cont. Corp.
Philip Rotstein, D.E.R.
File

Signed 
Roger L. McGuigan, P.E.



CENTURY LABORATORIES, INC.

P.O. Box 248/1501 Grandview Avenue/MidAtlantic Park, Thorofare, NJ 08086
Phone: (609) 848-3939 NJ 800-222-0589

ORIGINAL
(Red)

ANALYSIS REPORT

NO. A3425, A3426

ST

CERTIFICATE OF ANALYSIS

C
L
I
E
N
T

E.M.S. Resource Group
Suite 4, continental Building
60 West Germantown Pike
Norristown, PA 19401

LOG NUMBER

A3425

A3426

SAMPLE IDENTIFICATION

Metro Container Well #5

Metro Contianer Well #6

SAMPLE RECEIVED 3/23/84 ANALYSIS COMPLETED 5/16/84

COLLECTED BY _____

RESULTS (mg/L unless specified)

TEST PARAMETER	A3425	A3426	TEST PARAMETER	A3425	A3426
BOD ₅ *			Chlorine Demand		
COD	326	16,150	Chlorine Residual		
TOC	7	3910	Chloride (CL)	40	3700
Dissolved Oxygen			Silica		
Suspended Solids			Petroleum HYC.		
Total Solids			Hardness (as CaCO ₃)		
Dissolved Solids	434	24,800			
Sett. Solids (ml/L)					
pH	6.0	9.5			
Phenols	0.44	2.25	Aluminum		
Cyanide (Total)	<.01	.49	Antimony		
Fluoride			Arsenic		
Cyanide (Free)			Barium		
Surfactants (mg/L LAS)			Boron		
Oil & Grease (Freon)	38	14,600	Cadmium	<0.01	0.02
			Calcium (Ca)		
Nitrogen (KJD as N)			Chromium (Total)	0.07	0.45
Nitrogen (Ammonia as N)	2.19	74.5	Chromium (Hexa)		
Nitrogen (Organic as N)			Copper		
Nitrite (N)			Iron		
Nitrate (N)	5.3	1,000	Lead	<0.05	<0.05
Phosphate (P) Total	23	51	Magnesium (Mg)		
Phosphate (P) - Ortho			Manganese		
Sulfate (SO ₄)	109.2	1250	Mercury		
Sulfite (SO ₃)			Nickel		
Sulfide			Potassium		
Color			Selenium		
Turbidity (NTU)			Silver		
Conductivity (Micromohs)			Sodium		
Alk (Total) as CaCO ₃			Tin		
			Titanium		
Fecal Coliform			Zinc		
Total Coliform					

* A minimum of 5 sample dilutions were used for this determination

** Non-detectable, below the limit of detection.

LAB COMMENT:

E. M. S. Resource Group, Inc.

ENGINEERING & MANAGEMENT CONSULTANTS

ORIGINAL
(Red)

SUITE 4, CONTINENTAL BUILDING
60 WEST GERMANTOWN PIKE
NORRISTOWN, PA. 19401
215 272-5920

83B-004

August 6, 1984

Commonwealth of Pennsylvania
Department of Environmental Resources
Bureau of Solid Waste Management
Ridley Creek State Park
Sycamore Mills Road
Media, PA 19063

Attention: Mr. Robert Zang
Specialist

Subject: Metro Container Corporation
Groundwater Monitoring

Dear Bob:

Attached herewith are the sample analysis A8349 and A8350 by Century Environmental Laboratories showing the quarterly samples from Well #3 and #6. The wells are for the "old" lagoon area of Metro Containers (Universal Container) in Trainer, Pennsylvania.

If you have any questions concerning this matter, please do not hesitate to contact our office.

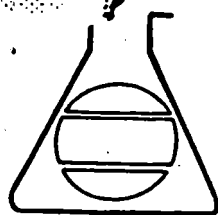
Sincerely,
E.M.S. RESOURCE GROUP, INC.

Roger L. McGuigan, P.E.
President, Engineering Group

RLM/amr

Enclosure

cc: Sidney Levy, Metro Container Corporation
Philip Rotstein, D.F.R.



CENTURY LABORATORIES, INC.

P.O. Box 248/1501 Grandview Avenue/MidAtlantic Park, Thorofare, NJ 08086
Phone: (609) 848-3939 NJ 800-222-0589

ORIGINAL
(Red)

ANALYSIS REPORT

NO. A8349, A8350

ST

CERTIFICATE OF ANALYSIS

C
L
I
E
N
T

E.M.S. Resource Group, Inc.
60 West Germantown Pike
Norristown, PA

LOG NUMBER

A8349

A8350

SAMPLE IDENTIFICATION

Metro Steel Drum #3

Metro Steel Drum #6

SAMPLE RECEIVED 6/28/84

ANALYSIS COMPLETED 7/13/84

COLLECTED BY _____

RESULTS (mg/L unless specified)

TEST PARAMETER	A8349	A8350	TEST PARAMETER	A8349	A8350
BOD ₅ *			Chlorine Demand		
COD	23	11,900	Chlorine Residual		
TOC	3	*	Chloride (CL)	105	3200
Dissolved Oxygen			Silica		
Suspended Solids			Petroleum HYC.		
Total Solids			Hardness (as CaCO ₃)		
Dissolved Solids	420	16,370			
Sent. Solids (ml/L)					
pH					
Phenols	*	*	Aluminum		
Cyanide (Total)			Antimony		
Fluoride			Arsenic		
Cyanide (Free)			Barium		
Surfactants (mg/L LAS)			Boron		
Oil & Grease (Freon)	*	*	Cadmium	≤0.01	0.04
			Calcium (Ca)		
Nitrogen (KJD as N)			Chromium (Total)	≤0.01	0.19
Nitrogen (Ammonia as N)	*	*	Chromium (Hexa)		
Nitrogen (Organic as N)			Copper		
Nitrite (N)			Iron		
Nitrate (N)	2.5	565	Lead	≤0.05	0.10
Phosphate (P) Total	*	*	Magnesium (Mg)		
Phosphate (P) - Ortho			Manganese		
Sulfate (SO ₄)	76	4,200	Mercury		
Sulfite (SO ₃)			Nickel		
Sulfide			Potassium		
Color			Selenium		
Turbidity (NTU)			Silver		
Conductivity (Micromohs)			Sodium		
Alk (Total) as CaCO ₃			Tin		
Fecal Coliform			Titanium		
Total Coliform			Zinc		

* A minimum of 6 sample dilutions were used for this determination.
Non-detectable, below the limit of detection.

AB COMMENT: * Insufficient sample to perform analysis.

E. M. S. Resource Group, Inc.

ENGINEERING & MANAGEMENT CONSULTANTS

ORIGINAL
(Red)

SUITE 4, CONTINENTAL BUILDING
60 WEST GERMANTOWN PIKE
HARRISBURG, PA 17101
215 272-5020

September 28, 1983

Pennsylvania Department
of Environmental Resources
Bureau of Solid Waste Management
P.O. Box 2063
Harrisburg, Pa. 17120

Subject: Change of Ownership Notification
Metro Container Corporation
Trainer, Pa.

Gentlemen:

With this letter is your completed form 1E-840-1. This form is submitted to notify you of the change in ownership of Universal Container Corporation, EPA - PAD044 (4525) to Metro Container Corporation.

We are also submitting a copy of the EPA correspondence indicating that this is a non-hazardous facility. We are requesting the EPA ID number be transferred to the new owner for this facility.

If you have any questions, please feel free to contact our office.

Sincerely,
E. M. S. RESOURCE GROUP, INC.

Richard L. Zimmerman, P.E.
President, Engineering Group

cc: Metro Steel Drum
Sidney Levy

RMH/...

BUREAU OF SOLID WASTE MANAGEMENT
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

ORIGINAL
(Red)

ER-SWM-69 Rev. 3/82

I. INSTALLATION IDENTIFICATION NUMBER														
P	A	D	0	4	4	5	4	5	8	9	5			
II. NAME OF INSTALLATION														
Metro Container Corporation														
III. INSTALLATION MAILING ADDRESS														
STREET OR P.O. BOX														
Second & Price Streets														
CITY OR TOWN												ST.	ZIP CODE	
Trainer												PA	19013	
IV. LOCATION OF INSTALLATION														
STREET OR ROUTE NUMBER												MUNICIPALITY		
Second & Price Streets												Borough of Trainer		
CITY OR TOWN												ST.	ZIP CODE	COUNTRY
Trainer												PA	19013	Delaware
V. INSTALLATION CONTACT														
NAME AND TITLE (Last, First & Middle Initial)												PHONE NUMBER (area code & no.)		
Sidney Levy, President												215-494-8200		
VI. OWNERSHIP														
NAME OF INSTALLATION'S LEGAL OWNER														
Metro Container Corporation														
B. TYPE OF OWNERSHIP														
(enter the appropriate letter into box)														
F - FEDERAL M - NON-FEDERAL														
VII. SIC CODES (4-digit in order of priority)														
A. FIRST B. SECOND C. THIRD D. FOURTH														
5085 (specify) Drum Reconditioning														
VIII. TYPE OF HAZARDOUS WASTE ACTIVITY														
<input type="checkbox"/> GENERATION <input type="checkbox"/> STORAGE <input type="checkbox"/> TREATMENT <input type="checkbox"/> DISPOSAL <input type="checkbox"/> REUSE <input type="checkbox"/> RECYCLING <input type="checkbox"/> OTHER (specify)														
IX. MODE OF TRANSPORTATION (transporter only)														
<input type="checkbox"/> A. AIR <input type="checkbox"/> B. RAIL <input type="checkbox"/> C. HIGHWAY <input type="checkbox"/> D. WATER <input type="checkbox"/> E. OTHER (specify)														
X. EXISTING ENVIRONMENTAL PROGRAM PERMITS														
A. NPDES (Discharges to Surface Water)														
NONE														
B. UIC (Underground Injection of Fluids)														
NONE														
C. RCRA (Hazardous Waste)														
NONE														
D. EPCRA (Air Emissions from Processed Solids)														
NONE														
E. SOLID WASTE														
NONE														
F. OTHER														
NONE														
XI. TYPE OF NOTIFICATION														

Mark "X" in appropriate box to indicate whether this is your installation's first notification of hazardous waste activity, or notification of a change of general information, hazardous waste handled, or hazardous waste activity. If you check B, C, D, E, or F, attach a letter of explanation (SEE INSTRUCTIONS).

- | | | |
|--|---|---|
| <input type="checkbox"/> A. FIRST NOTIFICATION | <input type="checkbox"/> C. DELETION OF A WASTE | <input type="checkbox"/> E. DELETION OF AN ACTIVITY |
| <input checked="" type="checkbox"/> B. CHANGE OF GENERAL INFORMATION | <input type="checkbox"/> D. ADDITION OF A WASTE | <input type="checkbox"/> F. ADDITION OF AN ACTIVITY |

ORIGINAL

XII DESCRIPTION OF HAZARDOUS WASTES (Continued)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 675.261(h)(2) for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 675.261(h)(3) for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary. **NONE**

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 675.261(h)(4) for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary. **NONE**

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 675.261(h)(5) for definition of characteristics.)

☐ 1. IGNITABLE

☐ 2. CORROSIVE

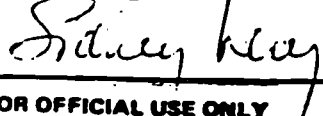
☐ 3. REACTIVE

☐ 4. TOXIC

XIII CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE



NAME and OFFICIAL TITLE (Type or Print)

PRESIDENT

DATE SIGNED

10/4/83

FOR OFFICIAL USE ONLY



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY**

ORIGINAL
(Red)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

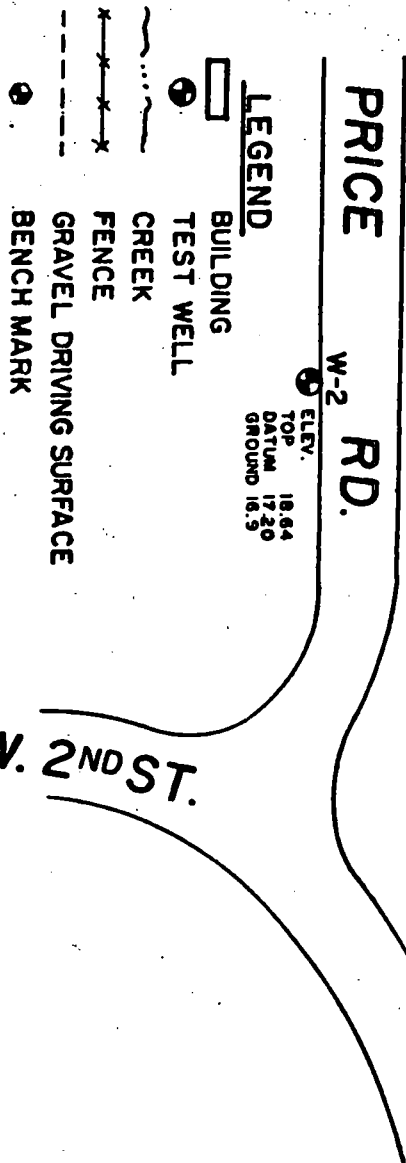
PAD 04 454 5895

INSTALLATION ADDRESS

Metro Container Corporation
Second & Price Streets
Trainer, PA 19013
Attn: Sidney Levy, President

Second & Price Streets
Trainer, PA 19013

11/25/83



NOTES

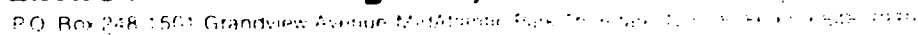
- 1) TOPOGRAPHY PLOTTED FROM FIELD SURVEY MADE ON OCT. 14, 1981.
- 2) THE BENCH MARK SET ON THE DOORSILL OF THE OFFICE BUILDING WAS BASED ON THE BOROUGH OF TRAINER SANITARY SEWER DATUM.

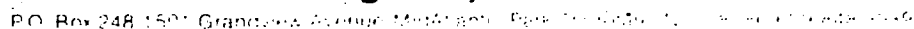
Original
(Red)

ROGER L. McGUIGAN
Professional Engineer

TEST WELL LOCATIONS
UNIVERSAL CONTAINER CORPORATION
W. 2ND ST. & PRICE RD. TRAINER, PENNA.

JOB No.	06059
DATE	10-16-81
SCALE	1"=100'
DRAWN BY	D.L.V.

[illegible]



NO FF3674, FF3675
Invoice #3157/pj

** Cannot be determined due to lack of materials.

CLIENT: Metro Containers Corp.DATE OF ANALYSIS: December 15, 1983ANALYSIS NO.: FF3670CHART NO.: T121583-04RESULTS OF LABORATORY ANALYSISSELECTED VOLATILE ORGANICS (Methods 601 & 602)

<u>PARAMETER</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #1. FF3670</u>
Chloromethane	1.0	N.D.
Bromomethane	1.0	N.D.
Vinyl Chloride	1.0	N.D.
Dichlorodifluoromethane	1.0	N.D.
Chloroethane	1.0	N.D.
Methylene Chloride	1.0	N.D.
Trichlorofluoromethane	1.0	N.D.
1,1-Dichloroethene	1.0	N.D.
1,1-Dichloroethane	1.0	N.D.
trans-1,2-Dichloroethene	1.0	N.D.
Chloroform	1.0	5.0
1,2-Dichloroethane	1.0	N.D.
1,1,1-Trichloroethane	1.0	N.D.
Carbon Tetrachloride	1.0	8.0
Bromodichloromethane	1.0	N.D.
1,2-Dichloropropane	1.0	N.D.
trans-1,3-Dichloropropene	1.0	N.D.
Trichloroethene	1.0	N.D.
1,1,2-Trichloroethane	1.0	N.D.
Dibromochloromethane	1.0	N.D.
cis-1,3-Dichloropropene	1.0	N.D.
Bromoform	1.0	N.D.

ORIGINAL
(Red)

CLIENT: Metro Containers Corp.

DATE OF ANALYSIS: December 15, 1983

ANALYSIS NO.: FF3670

CHART NO.: T121583-04

RESULTS OF LABORATORY ANALYSIS

SELECTED VOLATILE ORGANICS (Methods 601 & 602)

Page 2.

<u>PARAMETERS</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #1. FF3670</u>
1,1,2,2-Tetrachloroethane	1.0	N.D.
1,1,2,2-Tetrachloroethene	1.0	N.D.
Chlorobenzene	1.0	N.D.
Benzene	1.0	N.D.
Toluene	1.0	N.D.
Ethylbenzene	1.0	N.D.
1,2-Dichlorobenzene	1.0	N.D.
1,3-Dichlorobenzene	1.0	N.D.
1,4-Dichlorobenzene	1.0	N.D.

N.D. = <1.0ug/l

CLIENT: Metro Container Corp.DATE OF ANALYSIS: December 15, 1983ORIGINAL
(Red)ANALYSIS NO.: FF3671CHART NO.: T121593-05RESULTS OF LABORATORY ANALYSISSELECTED VOLATILE ORGANICS (Methods 601 & 602)

<u>PARAMETER</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #2. FF3671</u>
Chloromethane	1.0	N.D.
Bromomethane	1.0	N.D.
Vinyl Chloride	1.0	N.D.
Dichlorodifluoromethane	1.0	N.D.
Chloroethane	1.0	N.D.
Methylene Chloride	1.0	N.D.
Trichlorofluoromethane	1.0	N.D.
1,1-Dichloroethene	1.0	N.D.
1,1-Dichloroethane	1.0	N.D.
trans-1,2-Dichloroethene	1.0	N.D.
Chloroform	1.0	N.D.
1,2-Dichloroethane	1.0	N.D.
1,1,1-Trichloroethane	1.0	N.D.
Carbon Tetrachloride	1.0	N.D.
Bromodichloromethane	1.0	N.D.
1,2-Dichloropropane	1.0	N.D.
trans-1,3-Dichloropropene	1.0	N.D.
Trichloroethene	1.0	N.D.
1,1,2-Trichloroethane	1.0	N.D.
Dibromochloromethane	1.0	N.D.
cis-1,3-Dichloropropene	1.0	N.D.
Bromoform	1.0	N.D.

ORIGINAL
(Red)

CLIENT: Metro Container Corp.

DATE OF ANALYSIS: December 15, 1983

ANALYSIS NO.: FF3671

CHART NO.: T121583-05

RESULTS OF LABORATORY ANALYSIS

SELECTED VOLATILE ORGANICS (Methods 601 & 602)

Page 2.

<u>PARAMETERS</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #2. FF3671</u>
1,1,2,2-Tetrachloroethane	1.0	N.D.
1,1,2,2-Tetrachloroethene	1.0	N.D.
Chlorobenzene	1.0	N.D.
Benzene	1.0	N.D.
Toluene	1.0	N.D.
Ethylbenzene	1.0	N.D.
1,2-Dichlorobenzene	1.0	N.D.
1,3-Dichlorobenzene	1.0	N.D.
1,4-Dichlorobenzene	1.0	N.D.

N.D. = <1.0ug/l

ORIGINAL
(Red)CLIENT: Metro Containers Corp.DATE OF ANALYSIS: December 15, 1983ANALYSIS NO.: FF3672CHART NO.: T121583-06RESULTS OF LABORATORY ANALYSISSELECTED VOLATILE ORGANICS (Methods 601 & 602)

<u>PARAMETER</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #3. FF3672</u>
Chloromethane	1.0	N.D.
Bromomethane	1.0	N.D.
Vinyl Chloride	1.0	N.D.
Dichlorodifluoromethane	1.0	N.D.
Chloroethane	1.0	N.D.
Methylene Chloride	1.0	N.D.
Trichlorofluoromethane	1.0	N.D.
1,1-Dichloroethene	1.0	N.D.
1,1-Dichloroethane	1.0	N.D.
trans-1,2-Dichloroethene	1.0	N.D.
Chloroform	1.0	N.D.
1,2-Dichloroethane	1.0	N.D.
1,1,1-Trichloroethane	1.0	N.D.
Carbon Tetrachloride	1.0	N.D.
Bromodichloromethane	1.0	N.D.
1,2-Dichloropropane	1.0	N.D.
trans-1,3-Dichloropropene	1.0	N.D.
Trichloroethene	1.0	N.D.
1,1,2-Trichloroethane	1.0	N.D.
Dibromochloromethane	1.0	N.D.
cis-1,3-Dichloropropene	1.0	N.D.
Bromoform	1.0	N.D.

ORIGINAL
(Red)

CLIENT: Metro Container Corp.

DATE OF ANALYSIS: December 15, 1983

ANALYSIS NO.: FF3672

CHART NO.: T121583-06

RESULTS OF LABORATORY ANALYSIS

SELECTED VOLATILE ORGANICS (Methods 601 & 602)

Page 2.

<u>PARAMETERS</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #3. FF3672</u>
1,1,2,2-Tetrachloroethane	1.0	N.D.
1,1,2,2-Tetrachloroethene	1.0	13
Chlorobenzene	1.0	N.D.
Benzene	1.0	N.D.
Toluene	1.0	7.0
Ethylbenzene	1.0	19
1,2-Dichlorobenzene	1.0	8.0*
1,3-Dichlorobenzene	1.0	N.D.
1,4-Dichlorobenzene	1.0	*

N.D. = <1.0ug/l

*Compounds coelude

CLIENT: Metro Container Corp.DATE OF ANALYSIS: December 15, 1983 ^{ORIGINAL}ANALYSIS NO.: FF3674CHART NO.: T121583-11RESULTS OF LABORATORY ANALYSISSELECTED VOLATILE ORGANICS (Methods 601 & 602)

<u>PARAMETER</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #4. FF3674</u>
Chloromethane	1.0	N.D.
Bromomethane	1.0	N.D.
Vinyl Chloride	1.0	N.D.
Dichlorodifluoromethane	1.0	N.D.
Chloroethane	1.0	N.D.
Methylene Chloride	1.0	N.D.
Trichlorofluoromethane	1.0	N.D.
1,1-Dichloroethene	1.0	N.D.
1,1-Dichloroethane	1.0	N.D.
trans-1,2-Dichloroethene	1.0	N.D.
Chloroform	1.0	N.D.
1,2-Dichloroethane	1.0	N.D.
1,1,1-Trichloroethane	1.0	N.D.
Carbon Tetrachloride	1.0	N.D.
Bromodichloromethane	1.0	N.D.
1,2-Dichloropropane	1.0	N.D.
trans-1,3-Dichloropropene	1.0	N.D.
Trichloroethene	1.0	N.D.
1,1,2-Trichloroethane	1.0	N.D.
Dibromochloromethane	1.0	N.D.
cis-1,3-Dichloropropene	1.0	N.D.
Bromoform	1.0	N.D.

ORIGINAL
(Red)

CLIENT: Metro. Container Corp.

DATE OF ANALYSIS: December 15, 1983

ANALYSIS NO.: FF3674

CHART NO.: T121583-11

RESULTS OF LABORATORY ANALYSIS

SELECTED VOLATILE ORGANICS (Methods 601 & 602)

Page 2.

<u>PARAMETERS</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #4. FF3674</u>
1,1,2,2-Tetrachloroethane	1.0	N.D.
1,1,2,2-Tetrachloroethene	1.0	N.D.
Chlorobenzene	1.0	N.D.
Benzene	1.0	N.D.
Toluene	1.0	N.D.
Ethylbenzene	1.0	N.D.
1,2-Dichlorobenzene	1.0	N.D.
1,3-Dichlorobenzene	1.0	N.D.
1,4-Dichlorobenzene	1.0	N.D.

N.D. = <1.0ug/l

ORIGINAL
(Red)

CLIENT: Metro Container Corp.

DATE OF ANALYSIS: December 15, 1983

ANALYSIS NO.: FF3673

CHART NO.: T121583-09

RESULTS OF LABORATORY ANALYSIS

SELECTED VOLATILE ORGANICS (Methods 601 & 602)

<u>PARAMETER</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #5. FF3673</u>
Chloromethane	1.0	N.D.
Bromomethane	1.0	N.D.
Vinyl Chloride	1.0	N.D.
Dichlorodifluoromethane	1.0	N.D.
Chloroethane	1.0	N.D.
Methylene Chloride	1.0	N.D.
Trichlorofluoromethane	1.0	N.D.
1,1-Dichloroethene	1.0	N.D.
1,1-Dichloroethane	1.0	8.0
trans-1,2-Dichloroethene	1.0	5.0
Chloroform	1.0	N.D.
1,2-Dichloroethane	1.0	N.D.
1,1,1-Trichloroethane	1.0	N.D.
Carbon Tetrachloride	1.0	N.D.
Bromodichloromethane	1.0	N.D.
1,2-Dichloropropane	1.0	N.D.
trans-1,3-Dichloropropene	1.0	N.D.
Trichloroethene	1.0	14
1,1,2-Trichloroethane	1.0	N.D.
Dibromochloromethane	1.0	N.D.
cis-1,3-Dichloropropene	1.0	N.D.
Bromoform	1.0	N.D.

ORIGINAL
(Red)

CLIENT: Metro Container Corp.

DATE OF ANALYSIS: December 15, 1983

ANALYSIS NO.: FF3673

CHART NO.: T121583-09

RESULTS OF LABORATORY ANALYSIS

SELECTED VOLATILE ORGANICS (Methods 601 & 602)

Page 2.

<u>PARAMETERS</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #5. FF3673</u>
1,1,2,2-Tetrachloroethane	1.0	N.D.
1,1,2,2-Tetrachloroethene	1.0	N.D.
Chlorobenzene	1.0	N.D.
Benzene	1.0	N.D.
Toluene	1.0	2.0
Ethylbenzene	1.0	N.D.
1,2-Dichlorobenzene	1.0	N.D.
1,3-Dichlorobenzene	1.0	N.D.
1,4-Dichlorobenzene	1.0	N.D.

N.D. = <1.0ug/l

ORIGINAL
(Red)CLIENT: Metro Container Corp.DATE OF ANALYSIS: December 15, 1983ANALYSIS NO.: FF3675CHART NO.: T121583-14RESULTS OF LABORATORY ANALYSISSELECTED VOLATILE ORGANICS (Methods 601 & 602)

<u>PARAMETER</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #6. FF3675</u>
Chloromethane	1.0	N.D.
Bromomethane	1.0	N.D.
Vinyl Chloride	1.0	N.D.
Dichlorodifluoromethane	1.0	N.D.
Chloroethane	1.0	N.D.
Methylene Chloride	1.0	N.D.
Trichlorofluoromethane	1.0	N.D.
1,1-Dichloroethene	1.0	N.D.
1,1-Dichloroethane	1.0	N.D.
trans-1,2-Dichloroethene	1.0	N.D.
Chloroform	1.0	N.D.
1,2-Dichloroethane	1.0	N.D.
1,1,1-Trichloroethane	1.0	N.D.
Carbon Tetrachloride	1.0	N.D.
Bromodichloromethane	1.0	N.D.
1,2-Dichloropropane	1.0	N.D.
trans-1,3-Dichloropropene	1.0	N.D.
Trichloroethene	1.0	N.D.
1,1,2-Trichloroethane	1.0	N.D.
Dibromochloromethane	1.0	N.D.
cis-1,3-Dichloropropene	1.0	N.D.
Bromoform	1.0	N.D.

CLIENT: Metro. Container Corp.

DATE OF ANALYSIS: December 15, 1983 ^{ORIGINAL}_(Red)

ANALYSIS NO.: FF3675

CHART NO.: T121583-14

RESULTS OF LABORATORY ANALYSIS

SELECTED VOLATILE ORGANICS (Methods 601 & 602)

Page 2.

<u>PARAMETERS</u>	<u>DETECTION LEVEL (ug/l)</u>	<u>Well #6. FF3675</u>
1,1,2,2-Tetrachloroethane	1.0	N.D.
1,1,2,2-Tetrachloroethene	1.0	N.D.
Chlorobenzene	1.0	N.D.
Benzene	1.0	5.0
Toluene	1.0	9.2
Ethylbenzene	1.0	22
1,2-Dichlorobenzene	1.0	N.D.
1,3-Dichlorobenzene	1.0	N.D.
1,4-Dichlorobenzene	1.0	N.D.

N.D. = <1.0ug/l

Significant amounts of unidentified non halogenated compounds in sample



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

1875 New Hope Street
Norristown, PA 19401
215 270-1920

ORIGINAL
(Red)

January 15, 1988

Metro Container Corporation
Second & Price Streets
Trainer, PA 19016

Attention: Mr. Sidney Levy

Gentlemen:

The Pennsylvania Bureau of Air Quality Control is in the process of updating the "PEDS" emission inventory data for your facility. This year, computer generated worksheets have again been produced as a means to collect the necessary emission data for 1987. All facilities that actually emit more than 20 tons per year ("TPY") of particulate matter; 50 TPY of volatile organic compounds ("VOC"), SO_x, NO_x, or CO and any amount of asbestos, beryllium, mercury, benzene or vinyl chloride are classified as "major" facilities and are being asked to participate in the 1987 "PEDS" update program.

If Metro Container Corporation re-activated any existing air pollution sources or installed any new sources or control devices in 1987, an Initial "PEDS" Worksheet should be completed for those sources since they will not appear on the computer generated worksheets. Initial "PEDS" Worksheets are available upon request from the Norristown Regional Office. Also, if there are large storage tanks located at your facility, the Department asks that you indicate the number of tank "turnovers" for 1987 on the update forms, as well as providing the other information requested.

Completed PEDS update forms for all air pollution sources located at your facility during 1987 must be submitted to the Department of Environmental Resources' Norristown Regional Office by no later than March 1, 1988, as required by Section 135.3(a) of the Rules and Regulations. If you have any questions about how to complete any of the attached forms, please contact me for assistance. Your continued cooperation is appreciated.

Very truly yours,

NEIL O'CONNOR
Air Quality Specialist

cc: AQ File No.
Re 30 (BJO)15.12

ENCLOSURE



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

Ridley Creek State Park
E. Sycamore Mills Road
Media, Pennsylvania 19063
215 565-1687

ORIGINAL
(Red)

November 13, 1987

CERTIFIED MAIL NO. P 041 219 397

Mr. Sidney Levy
Metro Container Corp.
Second and Price Streets
Trainer, PA 19013

*S. L. Let's meet - you
Jenny & I. real soon to
discuss and reply and
plan action
Lew*

Re: Hazardous Waste Inspection
November 6, 1987
PAD044545895
Delaware County
Trainer Borough

NOTICE OF VIOLATION

Dear Mr. Levy:

On November 6, 1987 the Department performed an inspection of your facility in conjunction with the Code Enforcement Officer from the Borough of Trainer. During this inspection I observed numerous violations of the Pennsylvania Solid Waste Management Act (Act 97) and the Rules and Regulations of the Department. violations of applicable sections of the Regulations are as follows:

75.262(b)(1) - "A person or municipality who generates a solid waste, as defined in section 103 of the act (35 P.S. §6018.103) shall determine if that waste is a hazardous waste using the following procedure:

- (i) He shall first determine if the waste is excluded from regulation under §75.261(c) and (d) (relating to criteria, identification and listing of hazardous waste).
- (ii) He shall then determine if the waste is listed as a hazardous waste in §75.261(h) (relating to criteria, identification and listing of hazardous waste).
- (iii) If the waste is not listed, in §75.261(h), he shall determine whether the waste is identified in §75.261(g) by either:

Mr. Sidney Levy
November 13, 1987

- 2 -

ORIGINAL
(Red)

- (A) Testing the waste according to the methods set forth in §75.261 or according to an equivalent method approved by the Department under §75.260(c).
- (B) Applying knowledge of the hazard characteristic of the waste in light of the materials or the processes used.
- (iv) He shall determine if any spill or accidental discharge is subject to the reporting requirements of subsection (m) and shall comply with the requirements of subsection (m) except subsection (m)(5) for any such spill or accidental discharge."

Your company has repeatedly failed to supply the Department with hazardous waste determinations on all of your waste streams.

Act 97 Section 302(b) - "It shall be unlawful for any person or municipality who stores, processes, or disposes of residual waste to fail to:

- (1) Use such methods and facilities as are necessary to control leachate, runoff, discharges and emissions from residual waste in accordance with Department regulations.
- (2) Use such methods and facilities as are necessary to prevent the harmful or hazardous mixing of wastes.
- (3) Design, construct, operate and maintain facilities and areas in a manner which shall not adversely affect or endanger public health, safety and welfare or the environment or cause a public nuisance."

During my inspection I observed gross spillage of wastewater and treatment process residues directly onto the surface of the ground. These conditions have existed since the May 21, 1986 inspection and possibly existed prior to that date. Since then little or no effort has been made by your company to clean up previous spillages and prevent new spillage. These spillages have contributed to soil and groundwater contamination on your property.

You are hereby notified of both the existence of these violations as well as the need to provide for their prompt correction. Toward this end, you are requested to submit to the Department within fourteen (14) days a report explaining the reasons for the violations and a proposed program for the abatement of these violations.

Mr. Sidney Levy
November 13, 1987

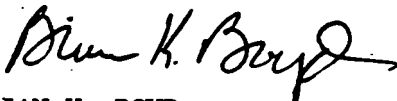
- 3 -

ORIGINAL
(Red)

This letter does not waive, either expressly or by implication, the power or authority of the Commonwealth of Pennsylvania to prosecute for any and all violations of law arising prior to or after the issuance of this letter or the conditions upon which the letter is based. This letter shall not be construed so as to waive or impair any rights of the Department of Environmental Resources, heretofore or hereafter existing.

This letter shall also not be construed as a final action of the Department of Environmental Resources.

Very truly yours,



BRIAN K. BOYD
Waste Management Specialist

cc: EPA
Trainer Borough
Ridley File
Re-File
Ce-File
Mr. Bonner
Re 30 (MCL)316

HAZARDOUS WASTE INSPECTION REPORT
TSD Facilities - Part A

ORIGINAL
(Red)

Date of inspection November 6, 1987 Time start 1:00 Time finish 2:30
Name of inspector Brian K. Boyd
Company, installation name Metro Container Corp.
Location Second + Price Sts Trainer, Pa 19013
County Delaware Municipality Trainer Boro
Identification number PAD 044545895
Name of responsible official Sidney Levy
Title President
Mailing address Second + Price Sts. Trainer, Pa 19013
Area code and phone no. (215) 485-6100
Name of person interviewed Jerry Butler
Title Operations Manager
Mailing address (if different from above) Same
Area code and phone no. _____

1. Site characterization:

- a. ☐ Treatment - ☐ surface impoundments, ☐ chemical, ☐ physical, ☐ biological
b. ☒ Storage - ☒ containers, ☐ tanks, ☒ surface impoundments, ☒ waste piles
c. ☐ Disposal - ☐ land treatment, ☐ landfill, ☐ incineration, ☐ thermal treatment
d. ☐ Use, ☐ reuse, ☐ recycle, ☐ reclaim

2. Does the facility generate hazardous wastes? ☒ Yes ☐ No

3. Types of hazardous waste produced by Hazardous Waste Number:
Hazardous Waste Determinations still have not been submitted to the Department.

4. Are hazardous wastes transported off-site by the facility? ☐ Yes ☐ No

HAZARDOUS WASTE INSPECTION REPORT
Generators - Part A

ORIGINAL
(Red)

Date of inspection November 6, 1987 Time start 1:00 Time finish 2:30
Name of inspector Brian K. Byrd
Company, installation name Metro Container Corp.
Location Second + Price Sts. Trainer, Pa. 19013
County Delaware Municipality Trainer Boro
Identification number PAD 044545-895
Name of responsible official Sidney Levy
Title President
Mailing address Second + Price Sts. Trainer, Pa. 19013
Area code and phone no. (215) 485-6100
Name of person interviewed Gerry Butler
Title Operations Manager
Mailing address (if different from above) Same
Area code and phone no. _____

1. Current waste handling method:

- 1 vs. 30 days*
- a. ☒ On-site ☒ treatment ☒ storage, ☐ disposal
b. ☐ On-site ☐ use, ☐ reuse, ☐ recycle, ☐ reclaim
c. ☒ Off-site ☐ treatment, ☐ storage, ☒ disposal
d. ☐ Off-site ☐ use, ☐ reuse, ☐ recycle, ☐ reclaim

2. Amount of hazardous waste produced:

- a. unknown kg./mo.
b. _____ kg./yr.

3. Types of hazardous waste produced by Hazardous Waste Number:

Flammables
Corrosives

4. Are hazardous wastes transported off-site by the generator? ☐ Yes ☒ No

Part C - Comments

Inspection

November 6, 1987

Identification Number

PAD0458005
(Reg)

y. Installation Name

Metro Container Co.y. Delaware

Municipality

Trainer Boro

This inspection was performed in conjunction with the Code Enforcement officer of Trainer Boro, Eugene Cori. At the time of this inspection, the following items were observed:

- 1) Wastewater treatment process holding tank has overflowed onto the ground surface.
- 2) Wastewater treatment process holding tank has no secondary impervious containment.
- 3) The oil removal area of the wastewater treatment ^{sys.} process has repeatedly overflowed onto the surface of the ground.
- 4) Hazardous waste determinations on all waste streams still have not been submitted to the Dept.
- 5) Spills ^{from} of the treatment process exist at several places throughout the plant and yard.

Metro has made no effort to rectify any of the above violations. No improvements ~~of~~ in housekeeping have been made.

Inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Solid Waste Management, inspected the above installation. Findings of this inspection are shown in this report. Any violations which were uncovered by the inspection are indicated. Violations may also be discovered upon examination of results of laboratory analyses and review of Department records. Notification will be coming, confirming any violations indicated herein and listing any additional violations.

Interviewed (signature)

Date

Director (signature)

John K. Boyce

Date

11/6/87

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

INSPECTION REPORT
SANITARY LANDFILL, INDUSTRIAL SITES
DEMOLITION SITES, FLYASH SITES, SLAG SITES

COMMENTS:
FORM NO. 10, 11, & 12

ORIGINAL
(Red)

DISPOSAL FACILITY Metro Containers
Open-head Drum Incinerator
DATE November 6, 1987

During the current inspection the following
was observed:

1. Ash ~~star~~ residue from incinerator
is not being stored properly. Full
roll-offs should be tarped when not in use.
2. Incinerator floor has been cleaned
since last inspection.

Brian K. Boyer
Department of Environmental Resources Representative

Mark K. Barth
Operator

IDENTIFICATION NUMBER (1-7)

400514

INSPECTION DATE (9-14)

Nov 6, 1987

INSPECTOR'S SOC. SEC. NO. (18-24)

B. Boyd

NAME OF DISPOSAL FACILITY

Metro Container Co. Second + Price St. Trainer, Pa. 19013

FACILITY ADDRESS

MUNICIPALITY

Trainer Boro

COUNTY

Delaware

FACILITY PROPRIETOR (NAME, ADDRESS & TELEPHONE NUMBER)

Sidney Levy same as above

DAILY VOLUME RECEIVED

Drum Incinerator - volume varies

ANNUAL REPORT RECEIVED

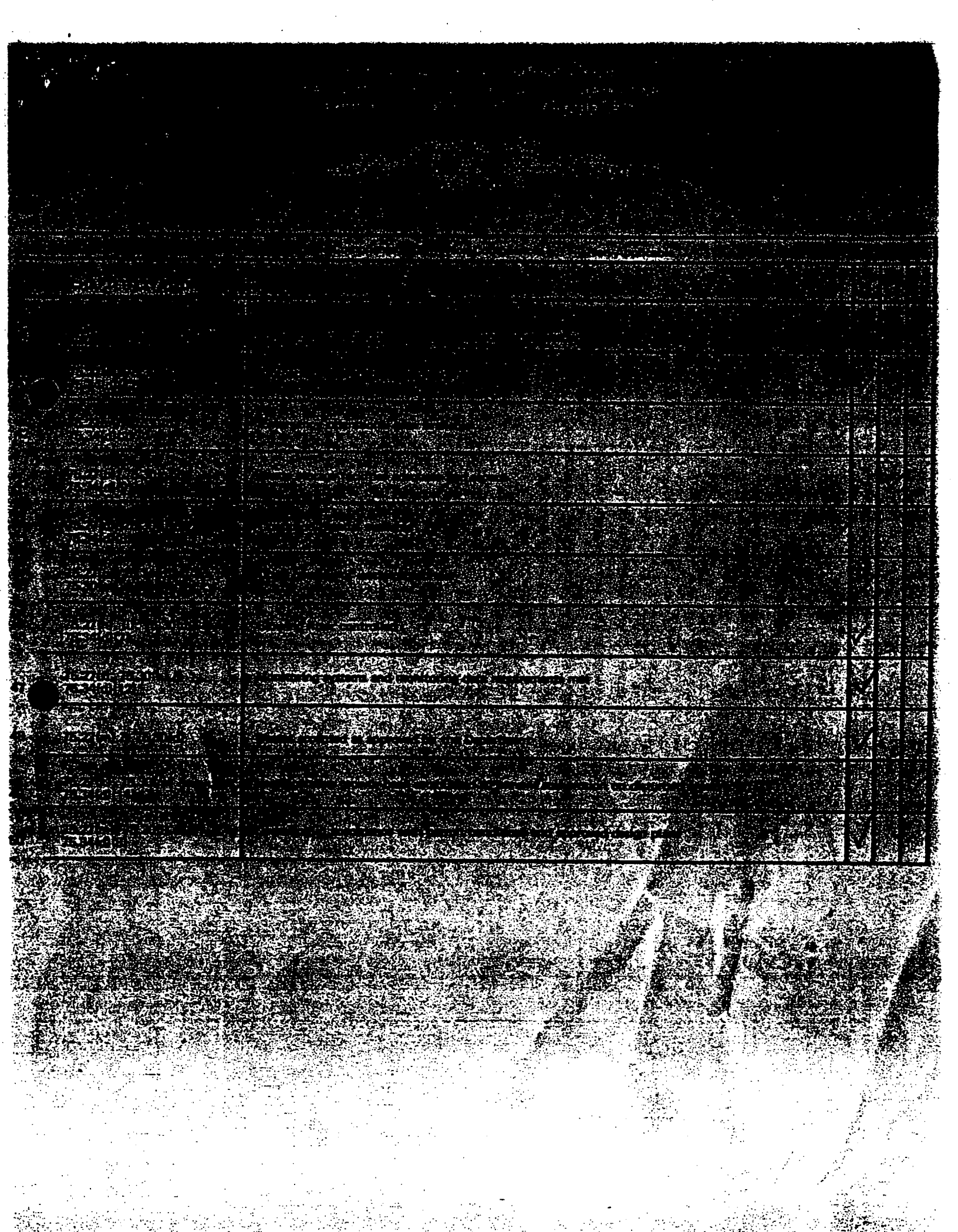
DAYS PER WEEK

OPERATED 5

1 - Compliance, 2 - Non-Compliance, 3 - Non-Applicable 4 - Not Determined

CHAPTER CITATION

			4	1	2	3
26	75.21(m)(3)	Suitable barrier blocks access to site when attendant is not present		✓		
27	75.21(b)(1), (2), (3)	Adequate fire equipment or procedure for minimizing fire hazard		✓		
28	75.21(i)	Site access roads are negotiable by loaded vehicles		✓		
29	75.21(q)	Approved operational safety program being utilized	✓			
30	75.21(m)(2)	Hours of operation prominently posted				✓
31	75.21(k)	Telephone or other communications available		✓		
32	75.21(o)(1)	Salvaging occurs in accordance with regulations		✓		
33	75.21(r)(1), (2), (3), (4)	Operational records maintained and method of measurement provided				
34	75.21(p)	Effective vector control program utilized at site where needed. Circle vector program required: bird, mosquito, rodent, fly				✓
35	75.27(q), 75.30(m) & 75.34(d)(5)	Dust controlled at site		✓		
36	75.27(i), 75.30(i) & 75.34(d)(10)	Bulky wastes properly controlled		✓		
37	75.27(r), 75.30(h) & 75.34(c)(13)	Residues or effluents collected and properly disposed of		✓		
38	75.27(i), 75.30(m) & 75.34(d)(11), (15)	All areas of building/equipment properly maintained		✓		
39	75.27(f), 75.30(n) & 75.34(d)(11)	Plumbing properly maintained, floors free of standing water		✓		





COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

Ridley Creek State Park
E. Sycamore Mills Road
Media, Pennsylvania 19063
215 565-1687

ORIGINAL
(Red)

July 11, 1988

CERTIFIED MAIL NO. P 740 804 478

Mr. Sidney Levy
Metro Enterprise Container Corp.
Metro Container Corp.
Second and Price Streets
Trainer, Pa. 19061

Re: March 3, 1988 Inspection
PAD 044545895
Permit # 400514
Trainer Borough

NOTICE OF VIOLATION

Dear Mr. Levy:

On June 27, 1988 the Department performed an inspection of your facility located at Second and Price Streets in Trainer, Pennsylvania. During this inspection I observed numerous violations of the Pennsylvania Solid Waste Management Act (Act 97) and the Rules and Regulations of the Department. Violations of applicable sections of the Regulations are as follows:

75.262(b)(1) - "A person or municipality who generates a solid waste as defined in section 103 of the act (35 P.S. subsection 6018.103) shall determine if that waste is a hazardous waste using the following procedure:

- (i) He shall first determine if the waste is excluded from regulations under subsection 75.261(c) and (d) (relating to criteria, identification and listing of hazardous waste).
- (ii) He shall then determine if the waste is listed as a hazardous waste in subsection 75.261(h) (relating to criteria, identification and listing of hazardous waste).
- (iii) If the waste is not listed, in subsection 75.261(h), he shall determine whether the waste is identified in subsection 75.261(g) by either:
 - (A) Testing the waste according to the methods set forth in subsection 75.261 or according to an equivalent method approved by the Department under subsection 75.260(c).
 - (B) Applying knowledge of the hazard characteristic of the waste in light of the materials or the processes used.

Mr. Sidney Levy
July 11, 1988

- 2 -

- (iv) He shall determine if any spill or accidental discharge is subject to the reporting requirements of subsection (m)(5) for any such spill or accidental discharge."

Your company has repeatedly failed to supply the Department with hazardous waste determinations on all of your waste streams.

Act 97 Section 302(b) - "It shall be unlawful for any person or municipality who stores, processes, or disposes of residual waste to fail to:

- (1) Use such methods and facilities as are necessary to control leachate, runoff, discharges and emissions from residual waste in accordance with Department regulations.
- (2) Use such methods and facilities as are necessary to prevent the harmful or hazardous mixing of wastes.
- (3) Design, construct, operate and maintain facilities and areas in a manner which shall not adversely affect or endanger public health, safety and welfare or the environment or cause a public nuisance."

During my inspection I observed gross spillage of wastewater and treatment process residues directly onto the surface of the ground. These conditions have existed since the May 21, 1986 inspection and possibly existed prior to that date. Since then little or no effort has been made by your company to clean up previous spillages and prevent new spillage. These spillages have contributed to soil and groundwater contamination on your property.

75.33(m) - "Housekeeping routines and grounds maintenance shall be performed regularly to assure that dust and dirt do not accumulate and that grounds are maintained free of litter or debris."

During my inspection I observed incinerator residues which were accumulating on the plant floor in the drum incinerator area. These residues should be contained in a containment device.

You are hereby notified of both the existence of these violations as well as the need to provide for their prompt correction. Toward this end, you are requested to submit to the Department within fourteen (14) days a report explaining the reasons for the violations and a proposed program for the abatement of these violations.

This letter does not waive, either expressly or by implication, the power or authority of the Commonwealth of Pennsylvania to prosecute for any and all violations of law arising prior to or after the issuance of this letter or the conditions upon which the letter is based. This letter shall not be construed so as to waive or impair any rights of the Department of Environmental Resources, heretofore or hereafter existing.

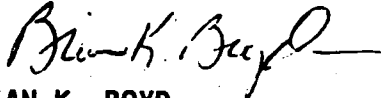
ORIGINAL
(Red)

Mr. Sidney Levy
July 11, 1988

- 3 -

This letter shall also not be construed as a final action of the Department of Environmental Resources.

Very truly yours,



BRIAN K. BOYD
Waste Management Specialist

cc: EPA
Trainer Borough
Ridley File
Regional File
Central File
Mr. Bonner
Mr. Bobek
Re 30 (RAB)189

**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT**

ORIGINAL
(Red)

**INSPECTION REPORT
TRANSFER STATIONS, INCINERATORS,
COMPOSTING FACILITIES, PROCESSING PLANTS
FORM NO. 11**

IDENTIFICATION NUMBER (1-7)

400514

INSPECTION DATE (9-14)

March 3, 1988

INSPECTORS SOC. SEC. NO. (16-24)

D. Gage

NAME OF DISPOSAL FACILITY

Metc. Containers Corp. Incinerator

FACILITY ADDRESS

Secord & Price Sts. Trainer, Pa. 19064

MUNICIPALITY

Trainer, Pa.

COUNTY

Delaware

FACILITY PROPRIETOR (NAME, ADDRESS & TELEPHONE NUMBER)

Sidney Leary Secord & Price Sts. Trainer, Pa. 19064

VOLUME RECEIVED

Dum... ..

ANNUAL REPORT RECEIVED

DAYS PER WEEK

OPERATED 4

1 - Compliance, 2 - Non-Compliance, 3 - Non-Applicable

4 - Not Determined

CHAPTER CITATION

1 2 3

26 75.21(m)(3)

Suitable barrier blocks access to site when attendant is not present

✓

27 75.21(b)(1), (2), (3)

Adequate fire equipment or procedure for minimizing fire hazard

✓

28 75.21(i)

Site access roads are negotiable by loaded vehicles

✓

29 75.21(q)

Approved operational safety program being utilized

✓

30 75.21(m)(2)

Hours of operation prominently posted

✓

31 75.21(k)

Telephone or other communications available

✓

32 75.21(o)(1)

Salvaging occurs in accordance with regulations

✓

33 75.21(r)(1), (2), (3), (4)

Operational records maintained and method of measurement provided

✓

34 75.21(p)

Effective vector control program utilized at site where needed. Circle vector program required: bird, mosquito, rodent, fly

✓

35 75.27(q), 75.30(m) & 75.34(d)(5)

Dust controlled at site

✓

36 75.27(i), 75.30(i) & 75.34(d)(10)

Bulky wastes properly controlled

37 75.27(r), 75.30(h) & 75.34(c)(13)

Residues or effluents collected and properly disposed of

✓

38 75.27(i), 75.30(m) & 75.34(d)(11), (15)

All areas of building/equipment properly maintained

✓

39 75.27(i), 75.30(n) & 75.34(d)(11)

Plumbing properly maintained, floors free of standing water

✓

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

INSPECTION REPORT
SANITARY LANDFILL, INDUSTRIAL SITES
DEMOLITION SITES, FLYASH SITES, SLAG SITES

COMMENTS:
FORM NO. 10, 11, & 12

ORIGINAL
(Red)

DISPOSAL FACILITY Metric Container
Corp. Incinerator
DATE March 3, 1988

During this inspection of incinerator #400514, no
violations were observed.

Note - A Collection trough will be installed beneath
the conveyor belt to collect all residues.
This will be installed the weekend of March 5, 6, 1988.

Alan K. Bough

Department of Environmental Resources Representative

John B. Bough

Operator

APPLICANT INSPECTOR REGIONAL OFFICE

**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT**

**INSPECTION REPORT
TRANSFER STATIONS, INCINERATORS,
COMPOSTING FACILITIES, PROCESSING PLANTS
FORM NO. 11**

**ORIGINAL
(Red)**

1 - Compliance, 2 - Non-Compliance, 3 - Non-Applicable 4 - Not Determined

CHAPTER CITATION		1 - Compliance, 2 - Non-Compliance, 3 - Non-Applicable <i>4 - Not Determined</i>				
40	75.27(m) & 75.34(d)(2)	Provisions for standby equipment available when needed	✓	1	2	3
41	75.27(e), 75.30(m) & 75.34(d)(12)	Unloading area adequate and secure				✓
42	75.27(m), 75.30(b) & 75.34(d)(2)	Emergency operational plan available	✓			
43	75.27(b), 75.30(g) & 75.34(d)(9)	Waste storage facilities adequate and secure <i>ash storage not meet temp</i>	✓			
4	75.27(d), 75.30(i) & 75.34(d)(8)	Operation manual available	✓			
5	75.27(o), 75.34(d)(4) & 75.30(m)	Open burning of waste prohibited	✓			
	75.27(h), (i), 75.30(m) & 75.34(d)(7)	Blowing litter controlled	✓			
	75.27(f), 75.30(h) & 75.34(d)(12)	Monitoring systems and monitoring data requirements met	✓			
	75.27(m) & 75.30(d)	Wastes accepted as approved by the Department	✓			
	75.27(k), 75.30(m) & 75.34(d)(14)	Has vegetative growth been established to prevent soil erosion on disturbed areas				✓
	75.27(m), 75.30(i) & 75.34(d)(8)	Operation in accordance with permit conditions and approved design plans	✓			

Hazardous Waste Inspection Report
Comments - Part C

Date of Inspection March 3, 1988 Identification Number PAD 041545815
 Company, Installation Name Metric Container Corp
 County Delaware Municipality Tram

This routine inspection of the Metric Container facility found the following violations, conditions present:

- 1) The Metric Container Corp. failed to bookkeeping on Dec 7, 1985. Since that time, the "close head" plant has ceased operations, but the "open head" plant continues to operate.
 - 2) The wastewater treatment process, holding tank and oil removal area have repeatedly malfunctioned and contaminated the adjacent soils.
 - 3) Hazardous waste determinations on all waste streams have not been submitted to the Dept. and this inspection.
 - 4) Poor housekeeping and gross spillages have discharged to the Stony Creek via rainwater runoff.
 - 5) Several thousand drums of WWTP sludge remain in yard.
- Metric Container has made minimal efforts to rectify or control the above violations.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Person Interviewed (signature) [Signature] Date 3/1/88
 Inspector (signature) [Signature] Date 3/1/88

Hazardous Waste Inspection Report
Generators - Part A

ORIGINAL
(Red)

Date of inspection March 3, 1988 Time start 12:30 Time finish 2:30
Name of inspector Brian K. Boyd
Company, installation name Metro Containers Corp.
Location Second & Price Sts. Trainer, Pa.
County Delaware Municipality Trainer, Pa.
Identification number PAD044545-595
Name of responsible official Sidney Levy
Title President
Mailing address Same
Area code and telephone number (215) 485-6100
Name of person interviewed Jerry Butler
Title Operations Manager
Mailing address (if different from above) Same as above
Area code and telephone number _____

1. Current waste handling method:

Permit by Rule

- | | | | | | |
|----|--|--|-----------------------------------|--|----------------------------------|
| a. | <input checked="" type="checkbox"/> On-site | <input checked="" type="checkbox"/> treatment, | <input type="checkbox"/> storage, | <input type="checkbox"/> disposal | <input type="checkbox"/> PBR |
| b. | <input type="checkbox"/> On-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |
| c. | <input checked="" type="checkbox"/> Off-site | <input type="checkbox"/> treatment, | <input type="checkbox"/> storage, | <input checked="" type="checkbox"/> disposal | |
| d. | <input type="checkbox"/> Off-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |

2. Amount of hazardous waste produced:

- a. _____ kg./mo.
b. _____ kg./yr.

3. Types of hazardous waste produced by Hazardous Waste Number:

4. Are hazardous wastes transported off-site by the generator? ☐ Yes ☒ No

**Pennsylvania Department of Environmental Resources
Bureau of Waste Management**

Hazardous Waste Inspection Report Generators — Part B

ORIGINAL
(Red)

1-Non-Compliance, 2-Compliance, 3-Not Applicable, 4-Not Determined

[illegible]



Metro Container Corp

POST OFFICE BOX A SECOND & PRICE STREETS TRAINER, PENNSYLVANIA 19016
(215) 627-7288 TELEPHONES (215) 419-0200



May 18, 1988

Mr. Neil O'Connor
Commonwealth of Pennsylvania
Department of Environmental Resources
1875 New Hope Street
Norristown, PA 19401

Dear Neil:

Enclosed please find our PEDS update for the year 1987.

I apologize for the delay but as you know Metro Container has filed Chapter 11 and in an effort to reduce our expenses Gardner Flynn is no longer involved with us on a regular basis.

Very truly yours,

Sidney Levy

SL:mak
Enclosure

AMFVIZORU
YEAR: 1987

PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF AIR QUALITY CONTROL

DATE 12/30/87
PAGE 1

UPDATE FORMS FOR CALENDAR 1987 OPERATIONS

ORIGINAL
(Red)

PETRO CONTAINER CORP.

LOCATION: TRAINER BORO

COUNTY: DELAWARE

23-2231601-01

SIC: 3491

CONTACT: SIDNEY LEVY

ADDRESS: ZAG & PRICE (F.O.A.)

TRAINER, PA 19016

TELEPHONE

(215) 484-4811

485-6100

** UTM COORDINATES ** ELEV

ZONE HORIZ VERT (FT)

18 465.30 4408.35 (110

SUMMARY OF FUEL USAGE AT THIS FACILITY:

TYPE	TOTAL USE	TYPE	TOTAL USE
#5 Fuel Oil	220,000		
Natural Gas	12,668,682		

*** **

SOURCE 001 HEAT PROCESS EQUIP.

PERMIT NO: 2301100

TYPE WASTE: BY-PROD

ORDER NO:

** SCHEDULE **

HRS/DAY

DAYS/YR

TOTAL HRS

***** THROUGHPUT *****

1ST QTR

2ND QTR

3RD QTR

4TH QTR

UNITS: TONS

** CATEGORY **

NESHAPS

NSPS

PSD

FUEL: NATURAL GAS

250 LBS

2ASH

BTU/LB-GAL-CUFT

** SCHEDULE **

HRS/DAY

DAYS/YR

TOTAL HRS

***** THROUGHPUT *****

1ST QTR

2ND QTR

3RD QTR

4TH QTR

UNITS: THOUSAND CU FT

** CATEGORY **

NESHAPS

NSPS

PSD

CHANGES IN INCINERATOR, CONTROL DEVICE(S) OR EXHAUST

NONE

SOURCE 001 BOILER ENGINEER'S SUPPLY

PERMIT NO:

RATED INPUT: 7.4

ORDER NO:

FUEL: AS OIL

USAGE PRIMARY FUEL

250 LBS 0.5

2ASH

BTU/LB-GAL-CUFT 140,000

DATE INSTALLED 6/3/09/01

** SCHEDULE **

HRS/DAY 8.0

DAYS/YR 250

TOTAL HRS 2000

***** THROUGHPUT *****

1ST QTR 55,000.00

2ND QTR 55,000.00

3RD QTR 55,000.00

4TH QTR 55,000.00

UNITS: GALLONS

** CATEGORY **

NESHAPS

NSPS

PSD

CHANGES IN FUEL(S) USED, CONTROL DEVICE(S) OR EXHAUST

NONE

ASPHALT
YEAR: 1987

PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF AIR QUALITY CONTROL

DATE 12/30/87
PAGE 2

ORIGINAL
(Red)

UPDATE FORMS FOR CALENDAR 1987 OPERATIONS

METRO CONTAINER CORP.

23-2231601-01

SOURCE 101 PAINT ECTH

PERMIT NO: 23318004

MATERIAL: REFURBISH DRUMS

ORDER NO:

** SCHEDULE **
HRS/DAY 16.0
DAYS/YR 250
TOTAL HRS 4000

***** THRUPUT *****
1ST QTR 12.00 2ND QTR 12.00
3RD QTR 12.00 4TH QTR 12.00
UNITS: TONS

** CATEGORY **
NESHAPS -
NSPS -
PSD -

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST NONE

SOURCE 102 ACID STRIP/WASH SYSTEM

PERMIT NO:

MATERIAL: RECONC. STEEL DR

ORDER NO:

** SCHEDULE **
HRS/DAY 8.0
DAYS/YR 250
TOTAL HRS 2000

***** THRUPUT *****
1ST QTR 1,392.00 2ND QTR 1,392.00
3RD QTR 1,392.00 4TH QTR 1,392.00
UNITS: TONS

** CATEGORY **
NESHAPS -
NSPS -
PSD -

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST NONE

SOURCE 103 PRE-HEAT & BAKING OVEN

PERMIT NO: 23318004

MATERIAL: RECONC. STEEL DR

ORDER NO:

** SCHEDULE **
HRS/DAY 16.0
DAYS/YR 250
TOTAL HRS 4000

***** THRUPUT *****
1ST QTR 168,000.00 2ND QTR
3RD QTR 4TH QTR
UNITS: TONS

** CATEGORY **
NESHAPS -
NSPS -
PSD -

FUEL: NATURAL GAS

ASOLFOR 2ASH 100/LE-GAL-CUFT 1,000

** SCHEDULE **
HRS/DAY
DAYS/YR
TOTAL HRS

***** THRUPUT *****
1ST QTR 1,784.00 2ND QTR 1,784.00
3RD QTR 1,784.00 4TH QTR 1,784.00
UNITS: THOUSAND CU FT

** CATEGORY **
NESHAPS -
NSPS -
PSD -

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST NONE

SOURCE 104 DRUM PRT STRIP SHOT BLAST

PERMIT NO:

MATERIAL: STEEL DRUM REFS

ORDER NO:

** SCHEDULE **
HRS/DAY 16.0
DAYS/YR 250
TOTAL HRS 4000

***** THRUPUT *****
1ST QTR 24,000.00 2ND QTR 24,000.00
3RD QTR 24,000.00 4TH QTR 24,000.00
UNITS: POUNDS

** CATEGORY **
NESHAPS -
NSPS -
PSD -

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST NONE

ORIGINAL
(Red)

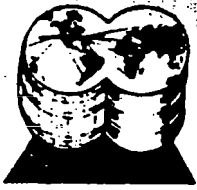
Subject: Open burning condition at discharge and feed in of incinerator

Corrective measure taken: Collection box has been built that is half filled with water, therefore, any small deposit that falls out will be extinguished when it falls into the water.

Corrective measure for discharge and conveyer . We have severed existing air curtain on discharge end to replace it with independent combustible blower, effectively producing a much greater air velocity at discharge end of conveyer. Also installation of an exit end chamber with another air curtain in place.

In reference to the material that falls out the discharge end of the incinerator: in the process of designing and installing a water bath sludge conveyer for the samll amount of debris. This should be accomplished within 4 to 6 weeks.

Temporarily until completion of water sludge conveyer we have placed containers full of water at the end and positioned a man with a water hose, which should correct any future problems even though they are very slight in nature.



Metro Container Corp

POST OFFICE BOX A SECOND & PRICE STREETS TRAINER, PENNSYLVANIA 19016
(215) ~~274-2288~~ TELEPHONES (215) ~~294-7205~~ 485-6100



February 10, 1988

Commonwealth of Pennsylvania
Department of Environmental Resources
1875 New Hope Street
Norristown, PA 19401

Attention: Mr. Neil O'Connor
Air Quality Specialist

Subject: File 23-000-264
Re 30 (SMC)29.4

Dear Mr. O'Connor:

Regarding your letter of February 3, 1988 we wish to advise you of the following corrective measures that have been taken.

- 1) A collection box has been built that is half-filled with water therefore insuring that any small deposit that falls out will be extinguished when it falls into the water.
- 2) As a corrective measure for the discharge end of the conveyor we have removed the existing air curtain on the discharge end and replaced it with an independent combustible blower, effectively producing a much greater air velocity at the discharge end of the conveyor. We have also installed another air curtain at the exit end of the chamber.
- 3) With reference to the material that flows out of the discharge end of the incinerator we are in the process of designing and installing a water bath sludge conveyor for the small amount of debris. This should be accomplished within four to six weeks. As a temporary measure until completion of the water sludge conveyor we have placed containers full of water at the end of the conveyor and stationed a man with a water hose at that point. This should correct any problems even though they are very slight in nature.

Should you have any questions regarding this matter, please contact either Gerry Butler or myself.

Very truly yours,

Sidney Levy
President



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

1875 New Hope Street
Norristown, PA 19401
215 270-1920

February 3, 1988

Metro Container Corporation
Second and Price Streets
Trainer, PA 19016

Attention: Mr. Sidney J. Levy

NOTICE OF VIOLATION

Gentlemen:

On January 27, 1988, I conducted an inspection of your facility located in Trainer Borough, Delaware County, Pennsylvania and observed the following violations of the Department's Air Pollution Rules and Regulations:

Section 129.14(a) and Section 127.25 in that your operation of the barrel incinerator produced an open burning condition at the discharge. In addition, there was open burning occurring at the feed end of the unit.

Although immediate action was taken to correct these violations, the Department needs an incident report from the company. This report should be submitted by February 12, 1988 and include a description of the corrective measures that have been taken to prevent similar problems in the future.

This Notice of Violation is not a final action of the Department, nor does it constitute a release from any liability, civil or criminal, for the unlawful conduct described above. If you have any questions concerning this matter, please contact me.

Very truly yours,


NEIL O'CONNOR
Air Quality Specialist

cc:

File 23-000-264
Re 30 (SMC)29.4

CHEMTEK, INC.

P.O. Box 1424 • Melvern, PA 19355 • (215) 438-4181

ORIGINAL
(Red)

Pa DER
1875 New Hope St
Morristown, Pa 19401

2/5/88

Attn: Mr. Neil O'Connor, Air Quality Specialist

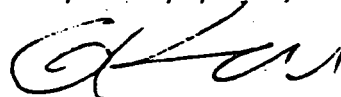
Subject: Metro Container Corporation, Trainer, Pa 19013

Re: Air Quality PEDS Emission Data Report

Dear Neil:

This report was referred to me by Mr Sidney Levey of subject company. The plant is closed and there are no emissions emanating from the sources listed in subject report. Please direct all questions regarding the status of this firm to Mr Levy in the future.

Very truly yours,



Gardner K Flynn, Jr
Environmental Consultant



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

1875 New Hope Street
Norristown, PA 19401
215 270-1920

ORIGINAL
(Red)

January 15, 1988

Metro Container Corporation
Second & Price Streets
Trainer, PA 19016

Attention: Mr. Sidney Levy

Gentlemen:

The Pennsylvania Bureau of Air Quality Control is in the process of updating the "PEDS" emission inventory data for your facility. This year, computer generated worksheets have again been produced as a means to collect the necessary emission data for 1987. All facilities that actually emit more than 20 tons per year ("TPY") of particulate matter; 50 TPY of volatile organic compounds ("VOC"), SO_x , NO_x , or CO and any amount of asbestos, beryllium, mercury, benzene or vinyl chloride are classified as "major" facilities and are being asked to participate in the 1987 "PEDS" update program.

If Metro Container Corporation re-activated any existing air pollution sources or installed any new sources or control devices in 1987, an Initial "PEDS" Worksheet should be completed for those sources since they will not appear on the computer generated worksheets. Initial "PEDS" Worksheets are available upon request from the Norristown Regional Office. Also, if there are large storage tanks located at your facility, the Department asks that you indicate the number of tank "turnovers" for 1987 on the update forms, as well as providing the other information requested.

Completed PEDS update forms for all air pollution sources located at your facility during 1987 must be submitted to the Department of Environmental Resources' Norristown Regional Office by no later than March 1, 1988, as required by Section 135.3(a) of the Rules and Regulations. If you have any questions about how to complete any of the attached forms, please contact me for assistance. Your continued cooperation is appreciated.

Very truly yours,

NEIL O'CONNOR
Air Quality Specialist

cc: AQ File No.
Re 30 (BJO)15.12

ENCLOSURE

AMERICAN
YEAR: 1987

PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF AIR QUALITY CONTROL

DATE 12/30/87
PAGE

ORIGINAL
(Red)

UPDATE FORMS FOR CALENDAR 1987 OPERATIONS

METRO CONTAINER CORP.

23-2231201-01

SOURCE 101 PAINT BOOTH
PERMIT NO: 23318304

MATERIAL: REFURBISH LCRMS
ORDER NO:

** SCHEDULE **

HRS/DAY ---
DAYS/YR ---
TOTAL HRS ---

***** THRUPUT *****

1ST QTR --- 2ND QTR ---
3RD QTR --- 4TH QTR ---
UNITS: TONS

** CATEGORY **

NESHAPS ---
NSPS ---
PSD ---

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST

SOURCE 102 ACID STRIP/ALUM SYSTEM
PERMIT NO:

MATERIAL: RECOND. STEEL OR
ORDER NO:

** SCHEDULE **

HRS/DAY ---
DAYS/YR ---
TOTAL HRS ---

***** THRUPUT *****

1ST QTR --- 2ND QTR ---
3RD QTR --- 4TH QTR ---
UNITS: TONS

** CATEGORY **

NESHAPS ---
NSPS ---
PSD ---

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST

SOURCE 103 PRE-HEAT & EXHAUST OVEN
PERMIT NO: 23318304

MATERIAL: RECOND. STEEL OR
ORDER NO:

** SCHEDULE **

HRS/DAY ---
DAYS/YR ---
TOTAL HRS ---

***** THRUPUT *****

1ST QTR --- 2ND QTR ---
3RD QTR --- 4TH QTR ---
UNITS: POUNDS

** CATEGORY **

NESHAPS ---
NSPS ---
PSD ---

FUEL: NATURAL GAS

2500000

2500

ETC/LE-GAL-CUFT

** SCHEDULE **

HRS/DAY ---
DAYS/YR ---
TOTAL HRS ---

***** THRUPUT *****

1ST QTR --- 2ND QTR ---
3RD QTR --- 4TH QTR ---
UNITS: THOUSAND CU FT

** CATEGORY **

NESHAPS ---
NSPS ---
PSD ---

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST

SOURCE 105 IRON PNT STRIP/SHOT BLAST
PERMIT NO:

MATERIAL: STEEL FROM REF--
ORDER NO:

** SCHEDULE **

HRS/DAY ---
DAYS/YR ---
TOTAL HRS ---

***** THRUPUT *****

1ST QTR --- 2ND QTR ---
3RD QTR --- 4TH QTR ---
UNITS: POUNDS

** CATEGORY **

NESHAPS ---
NSPS ---
PSD ---

CHANGES IN PROCESS, CONTROL DEVICE(S) OR EXHAUST

APFD126R6
YEAR: 1987

PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF AIR QUALITY CONTROL

DATE 12/30/01
PAGE 1
ORIGINAL
(Red)

UPDATE FORMS FOR CALENDAR 1987 OPERATIONS

PETRO CONTAINER CORP.
LOCATION: TRAINER ECHO

COUNTY: DELAWARE

23-2231601-01
SIC: 3491

CONTACT: SIDNEY LEVY
ADDRESS: 2ND & PRICE (P.O.)
TRAINER, PA 19016
TELEPHONE: (215) 494-8200
** UTM COORDINATES ** ELEV
ZONE HORIZ VERT (FT)
18 465.66 4408.35 (11)

SUMMARY OF FUEL USAGE AT THIS FACILITY:

TYPE	TOTAL USE	TYPE	TOTAL USE
------	-----------	------	-----------

*** **** **

SOURCE 001 HEAT PROCESS EQUIP.
PERMIT NO: 22201100
TYPE WASTE: BY-PROD
ORDER NO:

** SCHEDULE **	***** THROUGHPUT *****	** CATEGORY **
HRS/DAY	1ST QTR 2ND QTR	NESHAPS
DAYS/YR	3RD QTR 4TH QTR	NSPS
TOTAL HRS	UNITS: TONS	PSD

FUEL: NATURAL GAS
2500 LBS 2500 LBS 510/LB-GAL-CUFT

** SCHEDULE **	***** THROUGHPUT *****	** CATEGORY **
HRS/DAY	1ST QTR 2ND QTR	NESHAPS
DAYS/YR	3RD QTR 4TH QTR	NSPS
TOTAL HRS	UNITS: THOUSAND CU FT	PSD

CHANGES IN INCINERATOR, CONTROL DEVICE(S) OR EXHAUST

SOURCE 001 BOILER ENGINEER & SUPPLY
PERMIT NO:
RATED INPUT: 7.4
ORDER NO:

FUEL: AS OIL
USAGE PRIMARY FUEL
2500 LBS 2500 LBS 510/LB-GAL-CUFT
DATE INSTALLED 03/09/01

** SCHEDULE **	***** THROUGHPUT *****	** CATEGORY **
HRS/DAY	1ST QTR 2ND QTR	NESHAPS
DAYS/YR	3RD QTR 4TH QTR	NSPS
TOTAL HRS	UNITS: GALLONS	PSD

CHANGES IN FUEL(S) USED, CONTROL DEVICE(S) OR EXHAUST



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
1875 New Hope Street
Norristown, PA 19401
215 270-1920

ORIGINAL
(Red)

April 5, 1988

Metro Container Corporation
2nd and Price Streets
Trainer, PA 19016

Attention: Sidney Levy

*att S.L.
Please discuss*

NOTICE OF VIOLATION

Gentlemen:

On March 28, 1988, I conducted an inspection of your facility located in Trainer Borough, Pennsylvania and observed the following violations of the Department's Air Pollution Rules and Regulations:

Section 123.41(2) in that: Your pellet blast baghouse was emitting dust with a visible emission of an excess of 60 percent opacity.

The Department is responsible for enforcement of the Pennsylvania Air Pollution Control Act, including the recovery of monetary civil penalties for violations of Commonwealth law. To avoid litigation, the Department is willing to resolve this matter by accepting a monetary civil penalty payment for the specific violations described above. We will be sending you a proposed settlement letter shortly.

This Notice of Violation is not a final action of the Department, nor does it constitute a release from any liability, civil or criminal, for the unlawful conduct described above. If you have any questions concerning this matter, please contact me.

Very truly yours,

NEIL O'CONNOR
Air Quality Specialist

cc: File No. 23-000-264
Re 30 (BJO)96.6

ODOR EMISSIONS

ORIGINAL
(Red)

§ 123.31 Limitations.

(a) Limitations are as follows:

(1) If control of malodorous air contaminants is required pursuant to subsection (b), emissions shall be incinerated at a minimum of 1200°F 649°C for at least 0.3 seconds prior to their emission into the outdoor atmosphere.

(2) Techniques other than incineration may be used to control malodorous air contaminants if such techniques are equivalent to or better than the required incineration in terms of control of the odor emissions, and are approved in writing by the Department.

(b) No person shall cause, suffer, or permit the emission into the outdoor atmosphere of any malodorous air contaminants from any source in such a manner that the malodors are detectable outside the property of the person on whose land the source is being operated.

(c) The prohibition in subsection (b) shall not apply to odor emissions arising from the production of agricultural commodities in their unmanufactured state on the premises of the farm operation.

VISIBLE EMISSIONS

§ 123.41. Limitations.

No person shall cause suffer, or permit the emission into the outdoor atmosphere of visible air contaminants in such a manner that the opacity of the emission is:

(1) equal to or greater than 20% for a period or periods aggregating more than 3 minutes in any one hour; or

(2) equal to or greater than 60% at any time.

§ 123.42. Exceptions.

The limitations of § 123.41 of this title (relating to limitations) shall not apply to a visible emission in any of the following instances:

(1) when the presence of uncombined water is the only reason for failure of the emission to meet the limitations;

(2) when resulting from the operation of equipment used solely to train and test persons in observing the opacity of visible emissions;

(3) when from sources specified in § 123.1(a)(1)-(9) of this title (relating to prohibition of certain fugitive emissions); and

(4) when arising from the production of agricultural commodities in their unmanufactured state on the premises of the farm operation.

§ 123.43. Measuring techniques.

Visible emissions may be measured using:

(1) any device approved by the Department and maintained to provide accurate opacity measurements; or

(2) observers, trained and qualified to measure plume opacity with the naked eye or with the aid of any devices approved by the Department.

§ 123.44. Limitations of visible fugitive air contaminants from operation of any coke oven battery.

(a) No person shall cause, suffer or permit the operation of a coke oven battery in such a manner that visible fugitive air contaminants are emitted in excess of the emissions allowed by the following limitations:

ORIGINAL
(Red)

(1) The following open charging limitations applies to all existing batteries listed in § 121.1 of this title (relating to definitions) except Jones and Laughlin's A-5 battery at Aliquippa. The following closed charging limitation applies to the A-5 battery at Aliquippa and any other existing battery on which a closed charging system is installed.

(i) Open charging: At no time shall the aggregated times of visible open charging emissions during any four consecutive charges equal more than 75 seconds.

(ii) Closed charging: At no time shall there be closed charging emissions during more than one charge out of any ten consecutive charges.

(2) At no time shall door area emissions from any coke oven exceed 40% opacity 15 minutes or longer after the last charge to that oven.

(3) At no time shall there be any visible door area emissions from more than 10% of the door areas of operating coke ovens, excluding the two door areas representing the last oven charged on any battery and any door areas obstructed from view.

(4) At no time shall there be visible topside emissions from more than 2.0% of the charging port seals on operating coke ovens in any battery, excluding visible emissions from no more than three ovens which may be dampered off.

(5) At no time shall there be topside emissions from more than 5.0% of the offtake piping on operating coke ovens in any battery, excluding visible emissions from open standpipe caps on no more than three ovens which may be dampered off.

(6) At no time shall there be any topside emissions from any point on the top-side other than allowed emissions from charging port seals and offtake piping pursuant to paragraphs (4) and (5) of this subsection.

(7) At no time shall there be any visible emissions from the coke oven gas collector main.



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

ORIGINAL
(Red)

Ridley Creek State Park
E. Sycamore Mills Road
Media, Pennsylvania 19063
215 565-1687

March 11, 1988

CERTIFIED MAIL NO. P 593 924 164

Mr. Sidney Levy
Metro Container Corp.
Second and Price Streets
Trainer, PA 19013

Re: Hazardous Waste Inspection
March 3, 1988
PAD 044545895
Delaware County
Trainer Borough

NOTICE OF VIOLATION

Dear Mr. Levy:

On March 3, 1988 the Department performed an inspection of your facility located at Second and Price Streets in Trainer, Pennsylvania. During this inspection I observed numerous violations of the Pennsylvania Solid Waste Management Act (Act 97) and the Rules and Regulations of the Department. Violations of applicable sections of the Regulations are as follows:

75.262(b)(1) - "A person or municipality who generates a solid waste as defined in section 103 of the act (35 P.S. §6018.103) shall determine if that waste is a hazardous waste using the following procedure:

- (i) He shall first determine if the waste is excluded from regulation under §75.261(c) and (d) (relating to criteria, identification and listing of hazardous waste).
- (ii) He shall then determine if the waste is listed as a hazardous waste in §75.261(h) (relating to criteria, identification and listing of hazardous waste).
- (iii) If the waste is not listed, in §75.261(h), he shall determine whether the waste is identified in §75.261(g) by either:
 - (A) Testing the waste according to the methods set forth in §75.261 or according to an equivalent method approved by the Department under §75.260(c).

Mr. Sidney Levy
March 11, 1988
- 2 -

ORIGINAL
(Red)

- (B) Applying knowledge of the hazard characteristic of the waste in light of the materials or the processes used.
- (iv) He shall determine if any spill or accidental discharge is subject to the reporting requirements of subsection (m) and shall comply with the requirements of subsection (m) except subsection (m)(5) for any such spill or accidental discharge."

Your company has repeatedly failed to supply the Department with hazardous waste determinations on all of your waste streams.

Act 97 Section 302(b) - "It shall be unlawful for any person or municipality who stores, processes, or disposes of residual waste to fail to:

- (1) Use such methods and facilities as are necessary to control leachate, runoff, discharges and emissions from residual waste in accordance with Department regulations.
- (2) Use such methods and facilities as are necessary to prevent the harmful or hazardous mixing of wastes.
- (3) Design, construct, operate and maintain facilities and areas in a manner which shall not adversely affect or endanger public health, safety and welfare or the environment or cause a public nuisance."

During my inspection I observed gross spillage of wastewater and treatment process residues directly onto the surface of the ground. These conditions have existed since the May 21, 1986 inspection and possibly existed prior to that date. Since then little or no effort has been made by your company to clean up previous spillages and prevent new spillage. These spillages have contributed to soil and groundwater contamination on your property.

You are hereby notified of both the existence of these violations as well as the need to provide for their prompt correction. Toward this end, you are requested to submit to the Department within fourteen (14) days a report explaining the reasons for the violations and a proposed program for the abatement of these violations.

Mr. Sidney Levy
March 11, 1988

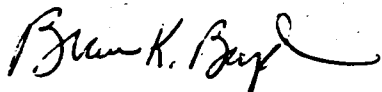
- 3 -

ORIGINAL
(Red)

This letter does not waive, either expressly or by implication, the power or authority of the Commonwealth of Pennsylvania to prosecute for any and all violations of law arising prior to or after the issuance of this letter or the conditions upon which the letter is based. This letter shall not be construed so as to waive or impair any rights of the Department of Environmental Resources, heretofore or hereafter existing.

This letter shall also not be construed as a final action of the Department of Environmental Resources.

Very truly yours,



BRIAN K. BOYD
Waste Management Specialist

cc: EPA
Trainer Borough
Ridley File
Ce-File
Mr. Bonner
Re 30 (MCL)71

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

ORIGINAL
(Red)

INSPECTION REPORT
SANITARY LANDFILL, INDUSTRIAL SITES
DEMOLITION SITES, FLYASH SITES, SLAG SITES

COMMENTS:
FORM NO. 10, 11, & 12

DISPOSAL FACILITY Metro Enterprise
Container Corp - Incinerator

DATE June 27, 1988

During this 6/27/88 inspection of the above facility, the following was observed/determined:

1. Incinerator residues are repeatedly allowed to accumulate on the plant floor. Containment devices should be used to collect these residues.
2. The Department should be notified when the disposal site for incinerator ash and residues is changed.

Brian K. Berg
Department of Environmental Resources Representative

Sent to Metro Container 7/12/88
Operator



**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES**

1875 New Hope Street
Norristown, PA 19401
215 270-1920

ORIGINAL
(Red)

June 1, 1988

Mr. Sidney Levy, President
Metro Container Corporation
2nd and Price Streets
Trainer, PA 19016

Re: Visible emission violation on
March 28, 1988

Dear Mr. Levy:

On March 28, 1988 a representative of the Department inspected Metro Container Corporation's facility in Trainer Borough, Delaware County, PA and observed the pellet blast baghouse emitting dust with a plume opacity of greater than 60 percent.

The Department has determined that the visible emissions described in Paragraph 1 above were in violation of Sections 121.7 and 123.41 of the Department's Rules and Regulations.

The violations described above also constitute unlawful conduct pursuant to Sections 8 and 13 of the Pennsylvania Air Pollution Control Act, 35 P.S. § 4008 and § 4013.

The Department is responsible for enforcement of the Pennsylvania Air Pollution Control Act, including the recovery of monetary civil penalties for violations of Commonwealth law.

To avoid litigation, we are willing to resolve this matter by accepting a monetary civil penalty payment for the specific violations described above. We are proposing a settlement on the following basis:

1. By June 30, 1988, Metro Container Corporation will pay two hundred dollars (\$200.00) to the Pennsylvania Clean Air Fund by means of a check made payable to the "Commonwealth of Pennsylvania - Clean Air Fund."
2. Upon receipt of the above payment and this signed agreement, the Department agrees to forego any further monetary civil penalty enforcement action against Metro Container Corporation for the specific violations and dates mentioned above.

ORIGINAL
(Red)

Mr. Sidney Levy, President

June 1, 1988

- 2 -

3. Notwithstanding the above, nothing in this agreement shall be construed to relieve Metro Container Corporation of any liability for unknown effects of violations described herein which may arise or be discovered in the future.

If our settlement proposal is acceptable, please have all copies of this agreement signed and dated on or before June 30, 1988. Two corporate officers must sign (President or Vice President, and Secretary or Treasurer), and the corporate seal must be affixed to each copy. Please return all copies of this agreement to our office at the above letterhead address. We will then execute the agreement on behalf of the Department and return an executed copy to you for your records.

All required penalty payments should be forwarded to:

Chief, Division of Abatement and Compliance
Bureau of Air Quality Control
Department of Environmental Resources
P. O. Box 2063
Harrisburg, PA 17120

Payment shall be accompanied by form number ER-AQ-3, a copy of which is enclosed.

Please be notified that after June 30, 1988, this settlement proposal will become void, and we will pursue other enforcement alternatives.

ORIGINAL
(Red)

Mr. Sidney Levy, President

June 1, 1988

- 3 -

If you have any questions, please contact me.

Very truly yours,

RICHARD L. RUHL
District Supervisor

FOR THE DEPARTMENT:

John R. Embick Date
Assistant Counsel
Approved as to Form and Legality

N. Rao Kona Date
Regional Air Pollution Control Engineer

FOR METRO CONTAINER CORPORATION:

Signature Date

Name

Title

Signature Date

Name

Title

Corporate Seal

cc: File 23-000-264
Office of Chief Counsel - Eastern Region
Regional Director
Compliance and Monitoring
Re 30 (COA)297

ORIGINAL
(red)



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

1875 New Hope Street
Norristown, PA 19401
215 270-1920

June 15, 1988

Metro Container Corporation
Post Office Box A
Second and Price Streets
Trainer, PA 19016

Attention: Mr. Sidney Levy

Gentlemen:

The Department requests the 1987 PEDs data for the Barrel Incinerator System (Source No. 001) which is carried under Metro Enterprise, Inc.. This request is consistent with our agreement for the 1986 PEDs data for the same source.

A note will be made to the PEDs comment section clarifying the status of this source. Should you wish, you may include a brief comment with the PEDs to be used as the note to the comments. Please submit the data requested by June 30, 1988.

Very truly yours,

NEIL O'CONNOR
Air Quality Specialist

cc: File 23-000-264
30 (SMC)167.9



State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

091011
(Reg)

Please print or type. (Form designed for use on site (12-point) typewriter.)

Form Approved. OMB No. 2000-0494. Expires 7-31-

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. IPAD10K145145129151911H	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.*	
3. Generator's Name and Mailing Address Metro Container 7000 Frick St Trenton, NJ 08612			A. State Manifest Document Number NJA016294		
4. Generator's Phone 1-215-145-1100			B. State Gen ID SAME		
5. Transporter 1 Company Name FLOWEN OIL DELAWARE VALLEY INC		6. US EPA ID Number NJ1019101516611	C. State Transporter ID NJ WAS 8156		
7. Transporter 2 Company Name		8. US EPA ID Number	D. Transporter's Phone 609-365-5544		
9. Designated Facility Name and Site Address FLOWEN OIL DELAWARE VALLEY INC 1800 CARMAN STREET CAMDEN, NJ 08105		10. US EPA ID Number NJ101910151316151717	E. State Transporter ID		
			F. Transporter's Phone		
			G. State Facility ID		
			H. Facility's Phone 609-365-5544		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13.	14.	15.
		No	Type	Total Quantity	Waste No
a. WASTE OIL N.O.S. & WATER COMBUSTIBLE LIQUID NA 1270		1	TT	12200 G	X726
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling codes for Wastes Listed Above			
		104-CENTRIFUGE			
b.		d.			
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name STEVE ZUBRIN		Signature <i>Steve Zubrin</i>		Date 1/11/2018	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>Joseph DiRocco</i>		Date 1/11/2018	
Printed/Typed Name JOSEPH DiRocco		Signature <i>Joseph DiRocco</i>		Date 1/11/2018	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Date	
19. Discrepancy Indication Space					
Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.					
Printed/Typed Name STEVE ZUBRIN		Signature <i>Steve Zubrin</i>		Date 1/11/2018	

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5660 (Day) (609) 292-7172 (Night)

ORIGINAL
(Red)



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

1875 New Hope Street
Norristown, PA 19401
215 270-1948

att S-L
Please discuss

April 11, 1988

Mr. Sidney Levy
Metro Enterprise Container Corporation
2nd and Price Street
Trainer, PA 19013

Re: New Municipal Waste Regulations
Permit No. 400514
Metro Enterprise Container Corporation

Dear Mr. Levy:

As you may know, the Department's new municipal waste regulations went into effect on April 9, 1988. The purpose of this letter is to advise you of some of the provisions of these regulations.

A copy of these regulations is enclosed. For your purposes, the most important chapters are Chapter 271 (general requirements for municipal waste management), Chapter 283 (requirements for resource recovery and other processing facilities), and Chapter 285 (requirements for collection, storage, and transportation).

If you haven't already done so, you should become familiar with all applicable provisions in these regulations. Several provisions of the regulations that require your prompt attention are identified below. This list was not meant to be all inclusive.

1. Under Section 283.261, daily operating reports must be completed. You should begin completing these reports immediately. Ten copies of the report form and instructions are enclosed. Completed forms for each day of operations should be maintained at the site and made available to Department inspectors upon request.
 - A. Your first annual operation report under the new regulations should be filed on or before June 30, 1989 (Section 283.262). This report should cover the period from April 9, 1988 through March 30, 1989. In subsequent years, this report should cover the period from April 1 through March 30. Copies of the annual report form will be available in the near future.

April 11, 1988

- 2 -

2. If you do not now have a bond posted for your facility, you should be aware that both the Solid Waste Management Act and the new regulations require that a bond be posted for processing facilities (Section 505(a) of Act 97 and Section 271.312(a) of the new regulations). Therefore, a bond should be posted for your facility by July 8, 1988. The bond should be consistent with the requirements of Sections 271.311 through 271.364. Any questions you may have concerning this should be directed to Ruth Plant.
3. If you have not already submitted proof to the Department of a commercial liability insurance policy covering third party claims for property damage and personal injury, Section 271.371(a) of the new regulations requires you to submit proof of such insurance coverage by July 8, 1988. Any questions you may have concerning this should be directed to Ruth Plant.
4. If your facility is a pathological/infectious waste incinerator you will have to submit on an annual basis, on a form provided by the Department a chemical analysis in accordance with Chapter 283.402(c) and on a quarterly basis a microbiological analysis in accordance with Chapter 283.402(b) of the ash residue.
5. If you incinerate waste other than pathological and infectious waste, you will only be subject to submitting a chemical analysis on a quarterly basis of the ash residue in accordance with Section 283.403(a)(2).
6. An inspection schedule for your facility is set forth in Section 271.421. Effective immediately, Department inspectors will be using inspection forms that reflect the new regulations. The forms have been modified so that completed inspection reports can serve as notice of violation.
7. Unless your permit contains a different expiration date, Section 271.211(f) provides that your existing permit now has an expiration date of April 9, 1993. You may apply for a permit renewal in accordance with Section 271.223.

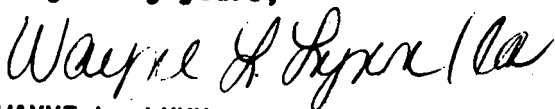
ORIGINAL
(Red)

April 11, 1988

- 3 -

All submissions required above should be directed to this office. Bond, bond calculation, and insurance forms are available from this office, or will be in the near future. We will try to assist you in any way possible. Please feel free to contact this office if you have any questions.

Very truly yours,



WAYNE L. LYNN
Regional Solid Waste Manager

cc: DER Field Office
Re 30 (MCL)98.20

Hazardous Waste Inspection Report
Generators - Part A(Red)
ORIGINALDate of inspection June 27, 1988 Time start 1:30 Pm Time finish 3:45 PmName of inspector Brian K Boyd, Mike BobekCompany, installation name Metro Container Corp.Location Second + Price Streets Trainer, PaCounty Delaware Municipality Trainer BoroIdentification number PAD044545895Name of responsible official Sidney LevyTitle PresidentMailing address same as aboveArea code and telephone number (215) 485-6100Name of person interviewed Sidney Levy, Lou MaslowTitle President, OwnerMailing address (if different from above) same as above

Area code and telephone number _____

1. Current waste handling method:

- | | | | | | |
|----|--|-------------------------------------|-----------------------------------|--|---|
| a. | <input checked="" type="checkbox"/> On-site | <input type="checkbox"/> treatment, | <input type="checkbox"/> storage, | <input type="checkbox"/> disposal | <input checked="" type="checkbox"/> PBR |
| b. | <input type="checkbox"/> On-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |
| c. | <input checked="" type="checkbox"/> Off-site | <input type="checkbox"/> treatment, | <input type="checkbox"/> storage, | <input checked="" type="checkbox"/> disposal | |
| d. | <input type="checkbox"/> Off-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |

2. Amount of hazardous waste produced:

a. _____ kg./mo.

b. _____ kg./yr.

Facility is partially
inactive.

3. Types of hazardous waste produced by Hazardous Waste Number:

4. Are hazardous wastes transported off-site by the generator? ☐ Yes ☐ No

Hazardous Waste Inspection Report
Generators — Part B(Red)
ORIGINAL

1—No Violation Observed				2—Not Applicable	3—Not Determined	4—Non-Compliance
Status				REQUIREMENT		Chapter Citation
1	2	3	4			75.262
				Hazardous waste determination, copies available		(b)
				Identification number		(c)(1)
				Hazardous waste shipments offered only to licensed transporters		(c)(4)
				Authorization received from TSD facility for wastes shipped off-site		(d)
				PA manifest used for intrastate shipments		(e)(2)
				Disposer state manifest or EPA format manifest used for out-of-state shipments		(e)(3)
				Manifests filled out properly and completely		(e)(7)
				Manifests routed properly and within time limits (7 days)		(e)(14) or (15)
				Proper U.S. DOT shipping containers or packages		(f)(1)(i)
				Shipping containers marked and labeled according to U.S. DOT		(f)(1)(ii)
				Containers of 110 gal. or less marked with required PA label		(f)(1)(iii)
				Placards offered to transporter		(f)(2)
				Wastes accumulated on-site for less than 90 days		(g)(1)(i)
				Wastes stored in proper containers and properly marked and labeled		(g)(1)(ii)
				Containers managed in accordance with 75.265(q)(1)–(9)		(g)(1)(iii)
				Containers clearly marked with accumulation date and visible for inspection		(g)(1)(iv)
				Records retained at designated location for 20 years		(h)
				Quarterly reports submitted to the Department		(i)
				Exception reporting procedures followed		(j)
				Hazardous waste disposal plan, if required		(l)
				Spill reporting procedures followed		(m)(1)
				Preparedness, Prevention and Contingency Plan and implemented		(m)(5)
				Special requirements followed for international shipments		(o)
				On the job or classroom personnel training program (75.265(f))		(g)(1)(6)
				Drum accumulation area inspected weekly as per 75.265(q)(5)		(g)(1)(iii)

Inspection Report Comments

ORIGINAL
(Red)

Date of Inspection June 27, 1988 Identification Number PAD 044545895

Company/Facility/Site Name Metro Container Corp.

A routine inspection was performed at the above facility on 6/27/88. Present during the inspection was Mike Bobek and myself. During this inspection we observed/determined the following:

- 1) The Metro Container Corp. remains inactive due to bankruptcy, however Metro Enterprise Corp. (drum incinerator & reconditioner) remain active.
- 2) The wastewater treatment process holding tank and oil removal ~~process~~ ^{system} have repeatedly overflowed. Residues remain in both areas and soil contamination continues ~~with~~ to occur.
- 3) As many as several thousand drums and three rolloff containers (approx 20 yds each) containing WWTP sludge continue to be disposed of on-site. Many of these drums are leaking.
- 4) Poor Housekeeping and gross spillages on the property have contributed to surface water discharges (to Stony Creek), soil contamination, and groundwater contamination.
- 5) Metro Container Corp. is presently negotiating a Consent order and agreement between themselves, the E.P.A. and Bankruptcy Court. The agreement will address environmental concerns on-site.

In the "Requirement" Section of this inspection report, each listed inspection item may provide only a brief version of its corresponding obligation as described in the body of the regulations. Please use the Chapter citations listed on this inspection report as a reference to obtain a detailed description of compliance requirements.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were observed during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification may be forthcoming, confirming any violations indicated herein and listing any additional violations.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person Interviewed (signature) Sent to Metro Container 7/12/88

Date

Inspector (signature)

Brian K. Bayel

Date

6/27/88

**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT**

ORIGINAL
(Red)

**INSPECTION REPORT
TRANSFER STATIONS, INCINERATORS,
COMPOSTING FACILITIES, PROCESSING PLANTS
FORM NO. 11**

IDENTIFICATION NUMBER (1-7) <u>400514</u>	INSPECTION DATE (9-14) <u>June 27, 1988</u>	INSPECTORS SOC. SEC. NO. (16-24) <u>B. K. Boyd</u>
NAME OF DISPOSAL FACILITY <u>Metro Enterprise Container Corporation</u>		FACILITY ADDRESS <u>Second & Price Sts. Trainer, Pa. 19066</u>
MUNICIPALITY <u>Trainer Boro</u>		COUNTY <u>Delaware</u>
FACILITY PROPRIETOR (NAME, ADDRESS & TELEPHONE NUMBER) <u>Sidney Levy Second & Price Sts. Trainer Pa 19066</u>		
VOLUME RECEIVED <u>Drum Incinerator</u>	ANNUAL REPORT RECEIVED	DAYS PER WEEK OPERATED <u>4</u>

1 - Compliance, 2 - Non-Compliance, 3 - Non-Applicable 4 - Not Determined

CHAPTER CITATION		4	1	2	3
6 75.21(m)(3)	Suitable barrier blocks access to site when attendant is not present		✓		
7 75.21(b)(1), (2), (3)	Adequate fire equipment or procedure for minimizing fire hazard		✓		
75.21(i)	Site access roads are negotiable by loaded vehicles		✓		
75.21(q)	Approved operational safety program being utilized	✓			
75.21(m)(2)	Hours of operation prominently posted				✓
75.21(k)	Telephone or other communications available		✓		
75.21(o)(1)	Salvaging occurs in accordance with regulations		✓		
75.21(r)(1), (2), (3), (4)	Operational records maintained and method of measurement provided				✓
75.21(p)	Effective vector control program utilized at site where needed. Circle vector program required: bird, mosquito, rodent, fly				✓
75.27(q), 75.30(m) & 75.34(d)(5)	Dust controlled at site		✓		
75.27(i), 75.30(i) & 75.34(d)(10)	Bulky wastes properly controlled				✓
75.27(r), 75.30(h) & 75.34(c)(13)	Residues or effluents collected and properly disposed of			✓	
75.27(i), 75.30(m) & 75.34(d)(11), (15)	All areas of building/equipment properly maintained			✓	
75.27(f), 75.30(n) & 75.34(d)(11)	Plumbing properly maintained, floors free of standing water	✓			

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

INSPECTION REPORT
TRANSFER STATIONS, INCINERATORS,
COMPOSTING FACILITIES, PROCESSING PLANTS
FORM NO. 11

ORIGINAL
(Red)

1 - Compliance, 2 - Non-Compliance, 3 - Non-Applicable				
CHAPTER CITATION	4	1	2	3
75.27(m) & 75.34(d)(2)	Provisions for standby equipment available when needed			✓
75.27(e), 75.30(m) & 75.34(d)(12)	Unloading area adequate and secure	✓		
75.27(m), 75.30(b) & 75.34(d)(2)	Emergency operational plan available	✓		
75.27(b), 75.30(g) & 75.34(d)(9)	Waste storage facilities adequate and secure <i>ash storage contained + tarped</i>	✓		
75.27(d), 75.30(l) & 75.34(d)(8)	Operation manual available	✓		
75.27(o), 75.34(d)(4) & 75.30(m)	Open burning of waste prohibited	✓		
75.27(h), (i), 75.30(m) & 75.34(d)(7)	Blowing litter controlled	✓		
75.27(f), 75.30(h) & 75.34(d)(12)	Monitoring systems and monitoring data requirements met			
75.27(m) & 75.30(d)	Wastes accepted as approved by the Department			✓
75.27(k), 75.30(m) & 75.34(d)(14)	Has vegetative growth been established to prevent soil erosion on disturbed areas			✓
75.27(m), 75.30(l) & 75.34(d)(8)	Operation in accordance with permit conditions and approved design plans	✓		



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
1875 New Hope Street
Norristown, PA 19401
215 270-1975

ORIGINAL
(Red)

September 3, 1987

Metro Container Corporation
Second and Price Streets
Trainer, PA 19013

Attention: Sidney Levy
President

Re: Industrial Waste NPDES Permit PA 0054844
Metro Container Corporation
Trainer Borough
Delaware County

Gentlemen:

Referenced permit is enclosed.

It will be necessary for you to submit a completed Discharge Monitoring Report (DMR) on a monthly basis to the appropriate agencies (see p. 5 of the NPDES permit). A master copy of the DMR form is enclosed which should be reproduced for your use in this regard.

Please study the permit carefully and direct any questions to the Permits Section of this office.

Very truly yours,

JOSEPH A. FEOLA
Regional Water Quality Manager

ENCLOSURES: Permit
Master Discharge Monitoring Report

cc: Gardner K. Flynn
EPA
DRBC
Trainer Borough (Transmittal letter only)
Permits & Compliance
Re 30 SNPDW11/

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF WATER QUALITY MANAGEMENT

ORIGINAL
(Red)

AUTHORIZATION TO DISCHARGE UNDER THE
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM

INDUSTRIAL PERMIT NO. PA 0054844

In compliance with the provisions of the Clean Water Act, 33 U.S.C. Section 1251 et seq. (the "Act") and Pennsylvania's Clean Streams Law, as amended, 35 P.S. Section 691.1 et seq.,

Metro Container Corporation
is authorized to discharge from a facility located at

Trainer Borough
Delaware County
to receiving waters named

Stoney Creek
in accordance with effluent limitations, monitoring requirements and other conditions set forth in Parts A, B, and C hereof.

This permit and the authorization to discharge shall expire at midnight,
9/3/92.

The authority granted by this permit is subject to the following further qualifications:

1. If there is a conflict between the application, its supporting documents and/or amendments and the terms and conditions of this permit, the terms and conditions shall apply.
2. Failure to comply with the terms or conditions of this permit is grounds for enforcement action; for permit termination, revocation and reissuance, or modification; or for denial of a permit renewal application.
3. Application for renewal of this permit, or notification of intent to cease discharging by the expiration date, must be submitted to the Department at least 180 days prior to the above expiration date (unless permission has been granted by the Department for submission at a later date), using the appropriate NPDES permit application form. In the event that a timely and complete application for renewal has been submitted and the Department is unable, through no fault of the permittee, to reissue the permit before the above expiration date, the terms and conditions of this permit will be automatically continued and will remain fully effective and enforceable pending the grant or denial of the application for permit renewal.
4. This NPDES permit does not constitute authorization to construct or make modifications to wastewater treatment facilities necessary to meet the terms and conditions of this permit.

PERMIT ISSUED

DATE

9/3/87

BY

Joseph A. Feola

Joseph A. Feola

ORIGINAL
(Red)

EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS, FOR DISCHARGE 001; LOCATED AT LATITUDE 39°49'30", LONGITUDE 75°23'58", WHICH RECEIVES WASTE FROM: Non contact cooling of air compressors and cooling tower blowdown

- A. The permittee is authorized to discharge during the period from issuance through expiration.
B. Based on production data and anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply:

DISCHARGE PARAMETERS	DISCHARGE LIMITATIONS*					MONITORING REQUIREMENTS		
	MASS UNITS (lbs/day)		CONCENTRATIONS (mg/l)			MEASUREMENT FREQUENCY	SAMPLE TYPE	24 HOUR REPORT UNDER A.3.C
	AVERAGE MONTHLY	MAXIMUM DAILY	AVERAGE MONTHLY	MAXIMUM DAILY	INSTAN- TANEOUS MAXIMUM			
FLOW (MGD)						1/Month	Calculation	
TEMPERATURE	See Other Requirements "B"				110°F	1/Month	I-S	
pH	Within Limits of 6 to 9 Standard Units at all times					1/Month	Grab	

There shall be no discharge of floating solids or visible foam in other than trace amounts.

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s): Outfall 001

*Unless otherwise indicated, these are gross discharge limitations.

5NPDW10/.5

2. Definitions

- a. The term "Bypass" means the intentional diversion of wastes from any portion of a treatment facility.
- b. The term "severe property damage" means substantial physical damage to property, damage to the treatment facilities which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of a bypass. Severe property damage does not mean economic loss caused by delays in production.
- c. The "average monthly" mass discharge means the total discharge by weight during a calendar month divided by the number of days in the month that the production or commercial facility was operating. Where less than daily sampling is required by this permit, the average monthly mass discharge shall be determined by the summation of all the measured daily discharges by weight divided by the number of days during the calendar month when the measurements were made.
- d. The "maximum daily" mass discharge means the total discharge by weight during any calendar day.
- e. The "average monthly" concentration means the arithmetic average of all the daily determinations of concentration made during a calendar month.
- f. The "daily determination of concentration" means either the concentration of a composite sample taken during a calendar day or the arithmetic average of all grab samples taken during a calendar day.
- g. The "maximum daily" concentration means the daily determination of concentration for any calendar day.
- h. The "instantaneous maximum" concentration means the concentration not to be exceeded at any time in any grab sample.
- i. The term "Composite Sample" means a combination of individual samples obtained at regular intervals over a time period. Either the volume of each individual sample is proportional to discharge flow rates, or the sampling interval (for constant volume samples) is proportional to the flow rates over the time period used to produce the composite. The maximum time period between individual samples shall not exceed two hours, except that for wastes of a uniform nature the samples may be collected on a frequency of at least twice per working shift and shall be equally-spaced over a 24-hour period (or over the operating day if flows are of a shorter duration).
- j. The term "Grab Sample" means an individual sample collected in less than 15 minutes.

- k. The term "i-s" means immersion stabilization - in which a calibrated device is immersed in the effluent stream until the reading is stabilized.
- l. The "average monthly" temperature means the arithmetic mean of temperature measurement made on an hourly basis, or the mean value plot of the record of a continuous automated temperature recording instrument, either during a calendar month or during the operating month if flows are of a shorter duration.
- m. The "maximum daily" temperature means the highest arithmetic mean of the hourly temperatures observed for any two (2) consecutive hours during a 24-hour day, or during the operating day if flows are of a shorter duration.
- n. The term "Measured Flow" means any method of liquid volume measurement, the accuracy of which has been previously demonstrated in engineering practice, or for which a relationship to absolute volume has been obtained.
- o. The term "At outfall XXX" means a sampling location in outfall line XXX downstream from the last point at which wastes are added to outfall line XXX, or otherwise specified.
- p. The term "Estimate" means to be based on a technical evaluation of the sources contributing to the discharge including, but not limited to, pump capabilities, water meters and batch discharge volumes.
- q. The term "non-contact cooling water" shall mean water which is used in a cooling system designed so as to maintain constant separation of the cooling medium from all contact with process chemicals but which may on occasion, as a result of corrosion, cooling system leakage or similar cooling system failures contain small amounts of process chemicals: provided, that all reasonable measures have been taken to prevent, reduce, eliminate and control to the maximum extent feasible such contamination: and provided further, that all reasonable measures have been taken that will mitigate the effects of such contamination once it has occurred.

3. SELF-MONITORING, REPORTING, AND RECORDS KEEPING**a. Representative Sampling**

Samples and measurements taken as required herein shall be representative of the volume and nature of the monitored discharge.

b. Reporting of Monitoring Results

- (1) Monitoring results obtained during each month shall be summarized for that month and reported on a Discharge Monitoring Report (DMR) Form postmarked no later than the 28th day of the following month. Duplicate signed copies of these and all other reports required herein, shall be submitted to the Department and the EPA Regional Office at the following addresses:

Department of Environmental Resources
Bureau of Water Quality Management
1875 New Hope Street
Norristown, Pennsylvania 19401

Program Management Section (3WM52)
Permits Enforcement Branch
Water Management Division
U.S. Environmental Protection Agency
Region III
841 Chestnut Building
Philadelphia, PA 19107

- (2) If the permittee monitors any pollutant, using analytical methods described in A.3.e. below, more frequently than the permit requires, the results of this monitoring shall be incorporated, as appropriate, into the calculations used to report self-monitoring data on the DMR.

c. Non-Compliance Reporting

- (1) 24-Hour Reporting ² The permittee shall orally report to the Department within 24-hours of becoming aware of the following:
- (a) Actual or anticipated non-compliance with any term or condition of this permit which may endanger health or the environment.
 - (b) Actual or anticipated non-compliance with any "maximum daily" discharge limitation which is identified in Part A.1 of this permit as being either:
 - (i) A toxic pollutant effluent standard established by EPA pursuant to Section 307(a) of the Clean Water Act,
 - (ii) For a toxic or hazardous pollutant which, if not adequately treated, could constitute a threat to human health, welfare, or the environment, or

- (iii) Any pollutant identified as the method to control a toxic pollutant or hazardous substance (i.e. indicator pollutant).
 - (c) Any unanticipated bypass which exceeds any effluent limitations in the permit.
 - (d) Where the permittee orally reports this information within the above mentioned 24-hour time period, a written submission outlining the above information must be submitted to the Department within 5-days of becoming aware of such a condition, unless this requirement is waived by the Department upon receipt of the oral report.
- (2) Other Non-Compliance Reporting
- (a) The permittee shall give advance notice to the Department of any planned changes to the permitted activity or facility which may result in non-compliance with permit requirements.
 - (b) Where the permittee knows in advance of the need for a by-pass which will exceed effluent limitations, it shall submit prior notice to the Department at least 10 days, if possible, before the date of the bypass.
 - (c) The permittee shall report all instances of non-compliance which are not reported above at the time of DMR submission.
- (3) The reports and notifications required above shall contain the following information:
- (a) A description of the discharge and cause of non-compliance;
 - (b) The period of non-compliance, including exact dates and times and/or the anticipated time when the discharge will return to compliance; and
 - (c) Steps being taken to reduce, eliminate, and prevent recurrence of the non-complying discharge.
- d. Specific Toxic Substance Notification Levels - The permittee shall notify the Department as soon as it knows or has reason to believe the following:
- (1) That any activity has occurred, or will occur, which would result in the discharge of any toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following "notification levels".
 - (a) One hundred micrograms per liter

- (b) Two hundred micrograms per liter for acrolein and acrylonitrile
 - (c) Five hundred micrograms per liter for 2, 4-dinitrophenol and 2-methyl -4, 6-dinitrophenol
 - (d) One milligram per liter for antimony
 - (e) Five (5) times the maximum concentration value reported for that pollutant in the permit application
 - (f) Any other notification level established by the Department
- (2) That it has begun, or expects to begin, to use or manufacture as an intermediate or final product or byproduct any toxic pollutant which was not reported in the permit application.

e. Test Procedures

Unless otherwise specified in this permit, the test procedures for the analysis of pollutants shall be those contained in 40 CFR Part 136, or alternate test procedures approved pursuant to that part.

f. Recording of Results

For each measurement or sample taken pursuant to the requirements of this permit, the permittee shall record the following information:

- (1) The exact place, date, and time of sampling or measurements;
- (2) The person(s) who performed the sampling or measurements;
- (3) The dates the analyses were performed;
- (4) The person(s) who performed the analyses;
- (5) The analytical techniques or methods used; and
- (6) The results of such analyses.

g. Records Retention

All records of monitoring activities and results (including all original strip chart recordings for continuous monitoring instrumentation and calibration and maintenance records), copies of all reports required by this permit, and records of all data used to complete the application for this permit shall be retained by the permittee for three (3) years. The three year period shall be extended as requested by the Department or the EPA Regional Administrator.

4. SCHEDULE OF COMPLIANCE

- a. The permittee shall achieve compliance with the effluent limitations specified for discharges in accordance with the following schedule:

b. **Periodic Reports Required**

No later than 14 calendar days following a date identified in the above schedule of compliance, the permittee shall submit to the Department a written notice of compliance or non-compliance with the specific schedule requirement. In the case of non-compliance, the notice shall include the cause of non-compliance, any remedial actions taken, the estimated date when compliance with the elapsed date shall occur, and the probability of meeting the next scheduled requirement.

I. MANAGEMENT REQUIREMENTS**a. Permit Modification, Termination, or Revocation and Reissuance**

- (1) This permit may be modified, terminated, or revoked and reissued during its term for any of the causes specified in 25 Pa. Code, Chapter 92.
- (2) The filing of a request by the permittee for a permit modification, revocation and reissuance, or termination, or a notification of planned changes or anticipated non-compliance, does not stay any permit condition.
- (3) Toxic Pollutants

Notwithstanding the above, if a toxic effluent standard or prohibition (including any schedule of compliance specified in such effluent standard or prohibition) is established under Section 307(a) of the Act for a toxic pollutant which is present in the discharge, and such standard or prohibition is more stringent than any limitation for such pollutant in this permit, then this permit shall be modified or revoked and reissued by the Department to conform with the toxic effluent standard or prohibition and the permittee so notified.

In the absence of a Departmental action to modify or to revoke and reissue this permit, any toxic effluent standard or prohibition established under Section 307(a) of the Act is considered to be effective and enforceable against the permittee.

b. Duty to Provide Information

- (1) The permittee shall furnish to the Department, within a reasonable time, any information which the Department may request to determine whether cause exists for modifying, revoking and reissuing, or terminating this permit, or to determine compliance with this permit.
- (2) The permittee shall furnish to the Department, upon request, copies of records required to be kept by this permit.
- (3) Other Information - Where the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in a permit application or in any report to the Department, it shall promptly submit such facts or information to the Department.
- (4) The permittee shall give advance notice to the Department of any planned physical alterations or additions to the permitted facility.

c. Facilities Operation

The permittee shall at all times maintain in good working order and properly operate all facilities and systems (and related appurtenances) for collection and treatment which are installed or used by the permittee for water pollution control and abatement to achieve compliance with the terms and conditions of the permit. Proper operation and maintenance includes but is not limited to effective performance based on designed facility removals, adequate funding, effective management, adequate operator staffing and training, and adequate laboratory and processing controls including appropriate quality assurance procedures. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to achieve compliance with this permit.

d. Adverse Impact

The permittee shall take all reasonable steps to minimize or correct any adverse impact on the environment resulting from non-compliance with this permit.

e. Bypassing

- (1) Bypassing not Exceeding Permit Limitations - The permittee may allow any bypass to occur which does not cause effluent limitations to be exceeded, but only if the bypass is for essential maintenance to assure efficient operation. This type of bypassing is not subject to the reporting and notification requirements of Part A.3.c above.
- (2) Other Bypassing - In all other situations bypassing is prohibited unless the following conditions are met:
 - (a) A bypass is unavoidable to prevent loss of life, personal injury or "severe property damage";
 - (b) There are no feasible alternatives to a bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment down-time. (This condition is not satisfied if the permittee could have installed adequate backup equipment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance); and
 - (c) The permittee submitted the necessary reports required under Part A.3.c above.
- (3) The Department may approve an anticipated bypass, after considering its adverse effects, if the Department determines that it will meet the three conditions listed above.

f. Reduction, Loss, or Failure of the Treatment Facilities

Upon reduction, loss, or failure of the treatment facilities, in order to maintain compliance with its permit, the permittee shall control production and all discharges until either the facility is restored or an alternative method of treatment is provided. This requirement applies in the situation where, among other things, the primary source of power of the treatment facility is reduced, lost, or fails.

g. Removed Substances

Solids, sludges, filter backwash, or other pollutants removed in the course of treatment or control of wastewaters shall be disposed of in a manner such as to prevent any pollutant from such materials from adversely affecting the environment.

2. RESPONSIBILITIES

a. Right of Entry

Pursuant to Sections 5(b) and 305 of Pennsylvania's Clean Streams Law and 25 Pa. Code, Chapter 92, the permittee shall allow the head of the Department, the EPA Regional Administrator, and/or their authorized representatives, upon the presentation of credentials and other documents as may be required by law:

- (1) To enter upon the permittee's premises where an effluent source is located or in which any records are required to be kept under the terms and conditions of this permit; and
- (2) At reasonable times to have access to and copy any records required to be kept under the terms and conditions of this permit; to inspect any monitoring equipment or monitoring method required in this permit; to inspect any collection, treatment, pollution management, or discharge facilities required under the permit; and to sample any substances or parameters at any location.

b. Transfer of Ownership or Control

- (1) No permit may be transferred unless approved by the Department.
- (2) In the event of any pending change in control or ownership of facilities from which the authorized discharges emanate, the permittee shall notify the Department by letter of such pending change at least 30 days prior to the change in ownership or control.

- (3) The letter shall be accompanied by the appropriate Department forms for transfer of the permit and a written agreement between the existing permittee and the new owner or controller stating that the existing permittee shall be liable for violations of the permit up to and until the date of permit transfer and that the new owner or controller shall be liable for permit violations from that date on.
- (4) After receipt of the documentation above, the Department shall notify the existing permittee and the new owner or controller of its decision concerning approval of the transfer. In approving a transfer the Department may modify or revoke and reissue the permit.
- (5) In the event the Department does not approve transfer of the permit, the new owner or controller must submit a new permit application.

c. Confidentiality of Reports

Except for data determined to be confidential under 25 Pa. Code, Chapter 92 all reports prepared in accordance with the terms of this permit shall be available for public inspection at the offices of the Department and the EPA Regional Administrator. Effluent data shall not be considered confidential.

d. Penalties and Liability

Nothing in this permit shall be construed to relieve the permittee from civil or criminal penalties for non-compliance pursuant to Section 309 of the Clean Water Act or Sections 602 or 605 of the Clean Streams Law.

Nothing in this permit shall be construed to preclude the institution of any legal action or relieve the permittee from any responsibilities, liabilities, or penalties to which the permittee is or may be subject under Section 311 of the Act.

e. Property Rights

The issuance of this permit does not convey any property rights in either real or personal property, or any exclusive privileges; nor does it authorize any injury to private property or any invasion of personal rights.

f. Other Laws

Nothing herein contained shall be construed to be an intent on the part of the Department to approve any act made or to be made by the permittee inconsistent with the permittee's lawful powers or with existing laws of the Commonwealth regulating industrial wastes and the practice of professional engineering, nor shall this permit be construed to sanction any act otherwise forbidden by federal or state law or regulation, or by local ordinance. Nor does it pre-empt any duty to obtain state or local assent required by law for the discharge(s).

g. Severability

The provisions of this permit are severable, and if any provision of this permit, or the application of any provision of this permit to any circumstances, is held invalid, the application of such provision to other circumstances, and the remainder of this permit, shall not be affected thereby.

PART C

OTHER REQUIREMENTS

- A. No chemical addition or treatment for control of corrosion, algae, slime, etc. shall be made to the cooling water which discharge is covered by this permit unless such chemical addition or treatment is approved beforehand by the Department of Environmental Resources.
- B. The following requirements apply with respect to the thermal impact of the discharge from outfall 001 upon Stoney Creek.

The discharge shall not cause a rise of stream temperature when the ambient stream temperature is 87°F or above; nor cause more than a 5°F rise above ambient temperature until stream temperature reaches 87°F; nor cause a change of stream temperature by more than 2°F during any one-hour period.

5NPDW10/.3

Additional Instructions for Utilizing
The
National Pollutant Discharge Elimination System
DISCHARGE MONITORING REPORT

The attached originals of the NPDES Discharge Monitoring Report have been provided to you as a master. The permit establishes specific effluent monitoring and reporting requirements and these values are repeated on the original Discharge Monitoring Report provided for you. The "N/A" placed in the permit condition block of the Discharge Monitoring Report indicates one of two things: (1) that the parameter is monitored but no limitations are imposed, and the pertinent value must be reported; or (2) that the parameter is limited elsewhere on the Discharge Monitoring Report, and the value should be reported if it is available.

Your reports are to be submitted by utilizing copies of the attached forms. Do no write on or send the attached originals, but rather: (1) make copies of them, (2) fill out the copies as appropriate, (3) make the necessary copies of the completed (filled out) form, and (4) submit these copies to the appropriate EPA and State Offices as provided in the permit.

ORIGINAL (Required)
NAME Metro Container Corporation
ADDRESS Second and Price Streets
Trainer, PA 19013
FACILITY Non contact cooling of air
compressors and cooling tower blowdown
LOCATION Trainer Borough, Delaware County

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

PA 0054844
PERMIT NUMBER001
DISCHARGE NUMBEROMB No. 2040-00
Expires 2-29-84

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE MONTHLY	MAXIMUM	UNITS	INST. MINIMUM	AVERAGE MONTHLY	INST. MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT	N/A		GPD						/Mo	Calc.
TEMPERATURE	SAMPLE MEASUREMENT						110	°F		/Mo	I-s
	PERMIT REQUIREMENT	--	--	--							
pH	SAMPLE MEASUREMENT			****	6.0	--	9.0	STD.		/Mo	Grab
	PERMIT REQUIREMENT	--	--								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.

TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

AREA
CODE

NUMBER

YEAR

MO

DA

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

6/1/84

Attn: Mr Kenneth L Vogt, Jr, PE

Subject: Industrial Wastewater Permit #01-01-0644-02-02
Re: June 1984 Monthly Report

Dear Ken:

Enclosed are subject reports as required by our permit.

Please let us know if you have any questions or comments on the attached.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer

DELCORA
100 East Fifth Street
Chester, Pennsylvania 19013

COMPANY NAME DELCORA
STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

PERMIT
NO. 01-01
0644-02-02
S.I.C.
CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

MONTH AND YEAR	DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD ₅ mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	COLOR AL mg/l	OTHER mg/l	OTHER mg/l	OTHER mg/l	REMARKS	
1984	1	F		F	0.006	78	6.55	17	1240	1340	3240	263	2100		2061		2004	0.2	0.4	6.10			22			20.01	0.05	9.0	1400	
	2	S																												
	3	W																												
	4	T			0.0027																									
	5	F			0.0033																									
	6	W			0.0043																									
	7	TH			0.0043																									
	8	F			0.0043																									
	9	S																												
	10	S																												
	11	W			0.0033																									
	12	T			0.0033																									
	13	W			0.0033																									
	14	TH			0.0040																									
	15	F			0.0050																									
	16	S																												
	17	S																												
	18	M			0.0033																									
	19	T			0.0050																									
	20	W			0.0052																									
	21	TH			0.0042																									
	22	F			0.0033																									
	23	S																												
	24	S																												
	25	M			0.0033																									
	26	T			0.0040																									
	27	W			0.0053																									
	28	TH			0.0044																									
	29	F			0.0046																									
	30	S																												
	31	Su																												
JUL 4 '84					0.0033																									
					0.0040																									

Company Name BCM LABORATORY

Street Address 521 W GERMANTOWN PKWY 19401

Signature _____

Title _____

Signature _____

Title RE

Name _____

Date _____

Name GARDNER R ELYNN ID _____

Date _____



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

ORIGINAL
(Red)

PLEASE REMIT CHECKS TO:
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19482
215-825-3800

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
PO BOX 1424
MALVERN, PA 19355

00-701366

6/24/84

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

BCM NUMBER	N408664
CLIENT SAMPLE ID	MONTHLY S AMPLE
DATE SAMPLED	6/1/84
DATE RECEIVED	6/1/84
TEST AND UNITS	(ANAL. METH.)
ALUMINUM MG/L	(9) 5.72
BOD/FH	(61)
BIOCHEMICAL OXYGEN DEMAND MG/L	1340
FH	6.85
CHLORIDE MG/L	(62) 4860.6
CHEMICAL OXYGEN DEMAND MG/L	(3) 3240
COPPER MG/L	(24) 0.20
SOLIDS, DISSOLVED MG/L	(49) 12400
IRON MG/L	(10) 20.04
METAL DIGESTION (METH.)	(10) 2.4
NOTE: MG/L	(10) 2.4

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.

**BCM Laboratory Division**521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447PLEASE REMIT CHECKS TO:
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800ORIGINAL
(Red)

FINAL REPORT

6/24/84 PAGE 2

CLIENT

METRO CONTAINER CORP

00-701388

BCM NUMBER	N408664
OIL	
% GREASE (FR. EXTRACTABLES) MG/L	(6) 22
LEAD (GF) MG/L	(29) 0.075
PHENOLS, as PHENOL MG/L	(57) .630
SULFIDE AS S MG/L	(123) <100
SELENIUM AS SE MG/L	(38) <0.001
TIN MG/L	(41) <1.00
SUSPENDED SOLIDS MG/L	(51) 19
TOTAL ORGANIC CARBON MG/L	(7) 1400
ZINC MG/L	(44) 0.40

LAB CERT. : EPA/PA-#38007, NJ-#77175, AL- #40300, EPA BULK ASBESTOS 0-#3331
AIHA/NIOSH-# 241/19401METHODS : 5) EPA # 415.1 6) EPA # 413.1 7) EPA # 415.1 9) EPA # 202.1
24) EPA # 220.1 26) EPA # 236.1 29) EPA # 239.2 34) EPA # 249.1
36) EPA # 270.3 41) EPA # 282.1 44) EPA # 289.3 49) EPA # 160.1
51) EPA # 160.1 57) EPA # 420.01-2 63) EPA # 405.100 61) EPA # 370.7
110) EPA - METALS 123) EPA # 376.1

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19482
215-825-3800

ORIGINAL
(Red)

FINAL REPORT

6/24/84 PAGE

3

CLIENT

METRO CONTAINER CORP

00-701388

END OF REPORT

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



DELAWARE COUNTY REGIONAL WATER QUALITY CONTROL AUTHORITY
P.O. Box 999 • 100 East Fifth Street • Chester, Pa. 19016

ORIGINAL
(Red)

June 12, 1984

Mr. Sidney Levy
President
Metro Container Corporation
Second and Price Streets
Trainer, Pennsylvania 19013

Re: Permit #01-01-0644-02-02 (formerly #66-1)

Dear Mr. Levy:

Enclosed is the analysis of a sample taken December 22, 1983. This monitoring is conducted in order to verify the adequacy of your industrial self-monitoring program, in demonstrating compliance with established limits, and in providing a more extensive characterization of your discharge. In looking at the Delcora results, the following observations have been made:

1. The pH determination is not within the Delcora limits of $5.5 \leq \text{pH} \leq 9.5$.
2. The oil and grease determination exceeded the level allowed by Delcora. The limit allowed for oil and grease is 100 ppm.
3. The value for TSS is unusually higher than any previously reported.
4. The determinations for BOD₅, COD, TOC, phenol and TDS are comparable with values previously reported.

In addition to the reported values of the analysis of the December sample, the following observations were made about the reported values of Metro Container's self-monitoring report for the month of April.

1. The phenol determination exceeded the maximum allowable limit of Delcora's regulations.
2. The value obtained by adding the daily flows did not equal the value of the total flow reported.
3. The determinations for BOD, COD, oil and grease, TOC, TDS, and TSS are comparable with values previously reported.

DIRECT-DIAL TELEPHONES (AREA CODE 215)

ADMINISTRATION
☒ 876-5523

CUSTOMER BILLING
☐ 876-5526

PURCHASING
☐ 494-4015

PLANT & MAINTENANCE
☐ 485-1925

Mr. Sidney Levy
June 12, 1984
Page 2

ORIGINAL
(Red)

We request a written explanation for the issues in question. We would appreciate your prompt attention in these matters. Please advise Delcora of their intended resolution.

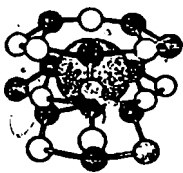
Thank you for your continued cooperation. If you have any questions, please feel free to contact either Ken Vogt or myself.

Very truly yours,



Donna A. Hendrick
Civil Engineer

DAH:smi
cc: Metro Container VM File
Enclosures



Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

"SOLUTIONS
START
HERE"

Phone: 609-541-6700
Telex: 834477

RECEIVED

ORIGINAL
(Red)

January 6, 1984

Delcora
100 East 5th Street
Chester, PA 19013

Attention: Ken Vogt

Reference: Test Report No. SR9030

This report covers the analysis of one (1) aqueous sample submitted to Stablex-Reutter, Inc. (S-R) on December 22, 1983. The analysis was performed according to the following publications:

- Standard Methods for the Examination of Water and Wastewater, 15th edition.
- EPA Chemical Analysis of Water and Wastes, EPA-600, 1979.
- Method 624 Federal Register, Vol. 44, No. 233, December 3, 1979. (Columns and GC/MS conditions for purgeable organic compounds)

Analytical results are delineated in the attached tables. Should you have any questions, please don't hesitate to contact the designated people.

Respectfully submitted,

STABLEX-REUTTER, INC.

Michael Shmookler (IC-)

Michael Shmookler
Group Leader, Organic Section

Catherine M. Ward
Catherine M. Ward
Group Leader, Inorganic Section

MS/CW/dk

Attachment: Analytical Results

Stablex-Reutter Inc.

ORIGINAL
(Red)

Delcora
Test Report No. SR9030
January 6, 1984
Page 2

Sample Designation

<u>Parameter</u>	<u>SR9030</u> <u>66-I</u>
Biochemical Oxygen Demand, 5 day (total)	940
Chemical Oxygen Demand	2,700
Oil and Grease	2,300
Total Organic Carbon	770
Phenolics, as phenol	1.7
pH, units	4.48
Total Dissolved Solids	7,400
Total Suspended Solids	2,300

Above results are expressed as micrograms of constituent per milliliter of sample (ppm) except where otherwise noted for pH.

Quality Assurance Data

Sample* plus Spike

<u>Parameter</u>	<u>Amount of Spike</u>	<u>% Recovery</u>
Chemical Oxygen Demand	50 ppm	77
Total Organic Carbon	50 ug	90
Phenol	0.30 ppm	93

* The spiked samples were analyzed simultaneously with the sample in this Test Report and may be found in Test Report Nos. SR9021, SR9022 and SR9045.

Delcora
Test Report No. SR9030
January 6, 1984
Page 3

Purgeable Organic Compounds (Method 624 by GC/MS)

<u>Constituent</u>	<u>SR9030</u> <u>661</u>
Bromomethane	<5.0
Vinyl chloride	<5.0
Chloroethane	<5.0
Methylene chloride	260
1,1-Dichloroethylene	<5.0
1,1-Dichloroethane	<5.0
trans-1,2-Dichloroethylene	<5.0
Chloroform	21
1,2-Dichloroethane	<5.0
1,1,1-Trichloroethane	1,200
Carbon tetrachloride	170
Bromodichloromethane	<5.0
1,2-Dichloropropane	<5.0
trans-1,3-Dichloropropene	<5.0
Trichloroethylene	<5.0
Dibromochloromethane	<5.0
Benzene	<5.0
1,1,2-Trichloroethane	<5.0
cis-1,3-Dichloropropene	<5.0
2-Chloroethylvinyl ether	<5.0
Bromoform	<5.0
1,1,2,2-tetrachloroethane	<5.0
Tetrachloroethylene	34
Toluene	1,800
Chlorobenzene	<5.0
Ethyl Benzene	69

Results expressed in micrograms of constituent per liter of sample (ppb).

Stablex-Reutter Inc.

Delcora
Test Report No. SR9030
January 6, 1984
Page 4

ORIGINAL
(Red)

Purgeable Organic Compounds (Method 624 by GC/MS)

Quality Assurance Data

SR9021 + Spike*

<u>Constituent</u>	<u>Amount of Spike, ug</u>	<u>% Recovery</u>
Chloromethane	1.0	91
Bromomethane	1.0	88
Vinyl chloride	1.0	89
Chloroethane	1.0	97
Methylene chloride	1.0	109
1,1-Dichloroethylene	1.0	111
1,1-Dichloroethane	1.0	115
trans-1,2-Dichloroethylene	1.0	105
Chloroform	1.0	120
1,2-Dichloroethane	1.0	102
1,1,1-Trichloroethane	1.0	111
Carbon tetrachloride	1.0	129
Bromodichloromethane	1.0	113
1,2-Dichloropropane	1.0	100
trans-1,3-Dichloropropene	1.0	92
Trichloroethylene	1.0	87
Dibromochloromethane	1.0	93
Benzene	1.0	93
1,1,2-Trichloroethane	1.0	92
cis-1,3-Dichloropropene	1.0	84
2-Chloroethylvinyl ether	1.0	96
Bromobenzene	1.0	98
1,1,2,2-tetrachloroethane	1.0	90
Tetrachloroethylene	1.0	77
Toluene	1.0	101
Chlorobenzene	1.0	96
Ethyl Benzene	1.0	91

* This spiked sample was analyzed simultaneously with the sample in this Test Report.



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800

ORIGINAL
(Red)

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
PO BOX 1424
MALVERN, PA 19355

00-701388

7/5/84

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

BCM NUMBER

N409284

CLIENT SAMPLE ID

CLARIFIED
WATER TA

DATE SAMPLED
DATE RECEIVED

6/6/84
6/11/84

TEST AND UNITS

(ANAL. METH.)

Discharge Limits

SILVER MG/L

(37) <0.02

ARSENIC (GF) MG/L

(12) 0.003 - 0.2 - OK

BERYLLIUM MG/L

(13) <0.01

CADMIUM MG/L

(16) 0.09 - 0.4 - High

CHEMICAL OXYGEN DEMAND MG/L

(3) 317 - No Limit

CHROMIUM AS CR MG/L

(19) 0.21 - 5.0 - OK

COPPER MG/L

(24) 0.22 - 0.2 - OK

SOLIDS, DISSOLVED MG/L

(49) 2390 - 20,000 - OK

MERCURY MG/L

(33) 1.0412 - 0.02 - OK

APICAL DISSECTION (MT) MT/PT

(110) 4.41 -

- 2.0 - OK



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

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BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19482
215-825-3800

ORIGINAL
(Red)

FINAL REPORT

7/5/84 PAGE 2

CLIENT

METRO CONTAINER CORP

00-701388

BCM NUMBER

N409284

OIL

& GREASE (FR. EXTRACTABLES) MG/L (6) 44

LEAD MG/L

(28) 2.78 - 0.2 - V HIGH

PH

(55) 4.8 - 5.5 - 9. - Blue Limit

PHENOLS, & PHENOL MG/L

(57) 9.57 - 0.5 (5) - V HIGH

ANTIMONY MG/L

(11) 0.17 - NOT LISTED IN REGULATION

SELENIUM AS SE MG/L

(38) <0.001 - 0.04 - OK

SUSPENDED SOLIDS MG/L

(51) 92 - NO LIMIT

THALLIUM MG/L

(40) <0.30 - NOT LISTED IN REG

TOTAL ORGANIC CARBON MG/L

(7) 143 - NO LIMIT

ZINC MG/L

(44) 6.27 - 1.0 - V HIGH

LAB CERT. : EPA/PA-#36007, NJ-#77175, AL- #40300, EPA BULK ASBESTOS G-#3339
AIHA/NIOSH-# 241/19401

METHODS : 3) EPA # 415.1 6) EPA # 413.1 7) EPA # 413.1 11) EPA # 804.1

12) EPA # 276.1 15) EPA # 21.1 16) EPA # 213.1 19) EPA # 114.1

17) EPA # 100.1 26) EPA # 129.1 30) EPA # 141.1 34) EPA # 144.1



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

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PLYMOUTH MEETING, PA 19462
215-825-3800

ORIGINAL
(Red)

FINAL REPORT

7/5/84 PAGE

3

CLIENT

METRO CONTAINER CORP

00-701388

36) EPA # 270.3 37) EPA # 272.1 40) EPA # 279.1 44) EPA # 289.1
49) EPA # 160.1 51) EPA # 160.1 55) EPA # 150.1 57) EPA # 420. (1-2)
110) EPA - METALS

END OF REPORT



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

8/14/85

Attn: Mr Kenneth L Vogt, Jr, PE, Senior Staff Engineer

Subject: Water/Material Balance Report
Re: Update Of Items Required Wm. Ross Letter

Dear Ken:

Enclosed is subject report as was requested. We will use this as the basis for our future meeting to discuss same. Also let me update you on the status of other items requested:

- (1) Materials Inventory Vs Priority Pollutant Analysis: As per our last meeting we opted to run a 14-day composite to determine potential problems in meeting DELCORA standards for TOX (5.0 mg/l) and CWA Section 307 toxic pollutants (total 30 mg/l, individual-5.0 mg/l). As of this date, we have not recieved any data from Stearns Catalytic who subcontracted the job to RMC. Bill Cowan has been calling them daily with no success. We need this information as it is necessary for our discussion on this matter. Certainly, as soon as the data is recieved, we will arrange our meeting to discuss this matter.
- (2) Facility Modifications/Drawings: I have submitted a project list to be assigned completion dates. As the projects are completed, drawings will be updated. These projects are in various stages. I will want to review this with Metro and have an update available by next Friday(8/23/85).
- (3) Also enclosed is a partial analysis of the July monthly report. When the analysis is complete will send you an updated completed form.
- (4) We are actively looking for an WWTP operator. We are in the process of interviewing and it looks promising. I hope we can hire someone by the end of August.

Let me know if you have any questions on the enclosed report before our meeting or anything else we can provide at this time.

Very truly yours,

Gardner K Flynn, Jr

WATER/MATERIAL BALANCE

ORIGINAL
(Red)

Water Consumption By Area		1984-85	6-Mos 1985
		Avg GPD	Avg GPD
(1)	Unmetered CW To River	20,000	2,000
(2)	Unmetered Water To Sewer	3,500	3,500
(3)	Unmetered Domestic To Sewer	650	650
(4)	Evaporation - Boiler	8,500	8,500
(5)	" - Process Tanks	2,500	2,500
(6)	" - Acid Scrubber	---	---
(7)	" - Paint Booth	---	---
(8)	Fresh Water - Process To Recycle	11,000	11,000
(9)	" " - Washdown To Sewer	2,000	2,000
(10)	" " - Tank Dumps	9,500	9,500
(11)	Total Consumption	57,650	40,530
(12)	Purchased Water	58,050	39,710
(13)	Differential	(600)	820

Water To Sewer/Recycle		Dmp Tnks	Dmp Tnks	All FW	All FW
		C/U 1/Wk	C/U 1/Dy	Dmp Tnks	Dmp Tnks
(14)	Process	11,000	11,000	28,800	28,800
(15)	Washdown	400	2,000	400	2,000
(16)	Tank dumps	1,900	9,500	1,900	9,500
(17)	Caustic	733	733	733	733
(18)	Acid	1,133	1,133	1,133	1,133
(19)	Alum	115	115	115	115
(20)	Total	15,281	24,481	33,081	42,281

WATER/MATERIAL BALANCE CALCULATIONS

ORIGINAL
(Red)

(1) Unmetered Water To River(Once-Thru Cooling)

Method: Stopwatch/bucket

Calc: (1) 60 Hp compressor - 5 gal/46sec x 60 sec/min = 6.5 gpm
 (2) 100 " " - 5 gal/41sec x " " = 7.3 "
 (3) Total 13.8 "

13.6 gpm x 1440 min/day = 19,870 gpd
 x 5 = 99,350 gpwk
 x 4 = 397,400 gpmo
 x 12 = 4,768,800 gpyr

(1A) Unmetered Water To River(Recirculating Cooling Tower)

Method: Stopwatch/bucket

Calc: (1) 2 gpm(measured) x 1440 min/day = 2,880 gpd makeup/blowdown(2 cycles).

Method: Theoretical

Calc: (1) Recirc rate = 120 gpm, $\Delta T = 20^{\circ}F(110-90^{\circ}F)$, 2.0 cycles concentration
 (2) 120 gpm x 0.02 = 2.4 gpm makeup/blowdown(2 cycles).

(3) Unmetered Domestic To Sewer

Method: Standard Formula

Calc: 65 employees x 10 gal/employee = 650 gal/day.

(3) Evaporation - Boiler

Method: Fuel Consumption

Calc: (1) Fuel consumption = 181,000 gpyr #6, BTU/gal = 144,000,
 boiler eff = 80% combustion, 80% overall
 (2) $\frac{181,000 \text{ gal} \times 144,000 \text{ BTU/gal} \times 0.8}{970.3 \text{ BTU/\# steam @ } 212^{\circ}F} = 21,489,436 \text{ \# steam}$
 (3) $21,489,436 \times 0.8 = 17,191,549 \text{ \# steam}$
 (4) $\frac{17,191,549}{8.33 \text{ \#/gal}} = 2,063,811 \text{ gpyr}$
 /12 = 171,984 gpmo
 /4 = 42,996 gpwk
 /5 = 8,599 gpd

Method: Meter Readings

Calc: Date	Gallons Used
1/31	8730
2/1	8410
2/5	8590
2/6	7920
2/7	6570
2/8	8830
2/13	7670
2/14	8490
2/15	7170

72,380/9 = 8042 gpd
 x 6 = 48,432 gpwk
 x 4 = 193,728 gpmo
 x 12 = 2,324,736 gpyr

ORIGINAL
(Red)

(4) Evaporation - Boiler(Cont'd)

Method: Boiler Operation Manual

Calc: (1) Feedwater requirement 400 Hp(13,800#/hr) = 28 gpm, % makeup = 50%

(2) $0.5 \times 28 \text{ gpm} = 14 \text{ gpm}$
 $\times 60 = 840 \text{ gph}$
 $\times 10 = 8400 \text{ gpd}$
 $\times 6 = 50,400 \text{ gpwk}$
 $\times 4 = 201,600 \text{ gpmo}$
 $\times 12 = 2,419,200 \text{ gpyr}$

(5) Evaporation - Process Tanks

Method: Experimental

Calc: (1) Evap rate @ 200°F @ 1 hour @ 0.31 sq ft

Start 1,000 cc

End 310 cc

690 cc = evap

(2) Evap rate = 2226 cc(0.6 gal)/sq ft/hr

(3) Surface Area/capacity of Process Tanks

Process Tank	Dimensions	Surf Area(Sq Ft)	Cap(Cu Ft)	Cap(gal)
Pre-flush	22'x2.5'x2'	55	110	825
" "	" " "	"	"	"
" "	" " "	"	"	"
Stpr Rinser	" " "	"	"	"
1st Caustic Rnse	12'x2.5'x4'	30	120	900
2nd " "	12'x4'x4'	48	192	1440
Hot Rinse	12'x4'x2'	48	192	1440
Neutralizer	12'x2'x2'	24	48	360
5-drum submerger	15'x2'x2'	30	60	450
Totals		400		7890

(4) Total evap = 0.06 gal/st/hr x 400 sq ft x 10 hr = 2400 gpd

$\times 5 = 12,000 \text{ gpwk}$

$\times 4 = 48,000 \text{ gpmo}$

$\times 12 = 576,000 \text{ gpyr}$

(6) Evaporation - Acid Scrubber

Not in service.

(7) Evaporation - Paint Booth

Not measured - need water meter.

(8) Fresh Water - Process To Recycle

Method: Stopwatch/bucket

Calc: (1) Time/5 gal bucket

16.23 sec

28.88 sec

17.96 sec

$63.07 \text{ sec}/3 = 5 \text{ gal}/21.02 \text{ sec} \times 60 \text{ sec/min} = 14.3 \text{ gpm}$

$\times 60 = 856 \text{ gph}$

$\times 10 = 8560 \text{ gpd}$

$\times 5 = 42,800 \text{ gpwk}$

$\times 4 = 171,200 \text{ gpmo}$

$\times 12 = 2,054,400 \text{ gpyr}$

ORIGINAL
(B. 4)

(2) Unmetered Water To Sewer

Method: Stopwatch/bucket

Calc: (1) $560 \text{ cc} / 3.68 \text{ sec} \times 60 \text{ sec/min} = \frac{9130 \text{ cc/min}}{3785 \text{ cc/gal}} = 2.41 \text{ gpm}$

(2) $2.41 \text{ gpm} \times 1440 \text{ min/day} = 3474 \text{ gpd}$
 $\times 7 = 24,318 \text{ gpwk}$
 $\times 4 = 97,272 \text{ gpmo}$
 $\times 12 = 1,167,264 \text{ gpyr}$

(10) Fresh Water - Tank Dumps

Method: Tank Capacity

Calc: (1) Tank Description	#/Capacity(gal)	Total Capacity(gal)
Pre-flush	3 x 1200	3600
Exterior	1 x 1800	1800
Interior	1 x 1400	1400
1st/2nd Caustic	2 x 800	1600
Hot Rinse	1 x 600	600
Cold Rinse	2 x 300	600
Neutralizer	1 x 300	300
5-drum submerger	1 x 500	500
		9500

Dump 1/wk = 9500 gal
 $\frac{1}{5} \text{ dy} = \frac{9500}{5} = 1900 \text{ gpd}$

(9) Fresh Water - Washdown To Sewer

Method: Stopwatch/bucket

Calc: 4 hoses x 8 gpm(measured)/hose x 60 min/hr x 4 hours = 2000 gal/washdown

Washdown 1/day = 2000 gal
 $\frac{1}{5} \text{ wk} = \frac{2000 \text{ gal}}{5 \text{ days}} = 400 \text{ gpd}$

(17) Caustic To System

Method: Purchase Records

Calc: 4/85 - 16,000 gal
 5/85 - 16,000 "
 6/85 - 12,000 "
 $\frac{44,000}{3} = 14,667 \text{ gpmo}$
 $/4 = 3,667 \text{ gpwk}$
 $/5 = 733 \text{ gpd}$

(18) Acid To System

Method: Purchase Records

Calc: 4/85 - 24,000 gal
 5/85 - 28,000 "
 6/85 - 16,000 "
 $\frac{68,000}{3} = 22,667 \text{ gpmo}$
 $/4 = 5,667 \text{ gpwk}$
 $/5 = 1,133 \text{ gpd}$

(12) PURCHASED WATER SUMMARY

ORIGINAL
(Red)

<u>Date</u>	<u>Gallons (000)</u>
12/83	1298.0
1/84	1406.0
2/84	1078.0
3/84	1268.0
4/84	1322.0
5/84	722.0
6/84	1678.0
7/84	1039.0
8/84	3123.0
9/84	1463.0
10/84	1439.0
11/84	670.0
12/84	427.0
1/85	836.0
2/85	578.0
3/85	619.0
4/85	1351.0
5/85	587.0

20,904.0/18 mo = 1161.0 gpmo
x 12 = 13,936,000 gpyr

PROPOSED SYSTEM MODIFICATIONS

ORIGINAL
(Red)

- (1) 50,000-gallon flow equalization tank
- (2) 50,000-gallon diversion tank
- (3) Caustic line/motorized valve tank #1 DAF system
- (4) Dedicated 4-6,000-gallon acid storage tank
- (5) Flow meter or flow indicator on DAF conditioning tank supply pump
- (6) Scatter turbidimeter/relay/control valve divert system
- (7) Panel upgrade at DAF control panel to indicate system function/controls
- (8) Conversion of plant water lines to allow use of clarified water for clean-up operations
- (9) Backup Systems
 - (a) W&T chemical feed pump
 - (b) pH probe assembly
 - (c) pH controller unit
 - (d) Rupp pump #2 pumphouse
 - (e) Chemical conditioning tank supply pump



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

8/5/85

Attn: Mr Kenneth L Vogt, Jr, PE, Senior Staff Engineer

Subject: Self-Monitoring Reoprts
Re: Your Letter 7/29/85

Dear Ken:

Enclosed please find subject reports for May and June(July not due until August 10). your should have the completed April report, however, I have enclosed a copy for your records. The May and June reports were late due to delays experienced in getting the analysis reports from Stearns Catalytic. Copies of the lab reports are enclosed to document this. As you will note, while the analysis of many items have been completed in 10 days, many were not completed within one month of the date of submission. Indeed, some were not even started within that period. Additionally, some samples had to be resubmitted as errors in sampling(incomplete bottle sets) caused further delays. The result is that we wound up with verbal results which were incomplete which Cowan will not sign on your report form unless he has signed the printout. We have to request the partial printout if the analysis has not been completed.

We seem to experience these difficulties from time to time because, as you know, many labs are overloaded especially if they land a large contract. The initial problems of being a new customer add to this making it difficult if not impossible to meet the prescribed deadline.

In the future, we submit samples as early in the month as possible to allow more time for delays and, if reports are incomplete, we will get Cowan to sign the printout of the partial analysis and the report form noting that the final report will be submitted when the results are obtained.

Please contact me should there be any questions on the above.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer

Steams
Catalytic
ORIGINAL
(Red)

Page No. 1
07/25/85

1200

STEAMS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE ANALYSIS STARTED	DATE ANALYSIS COMPLETED
8208	METRO CONTAINER 07/01/85	AA Fe		0.86 mg/l	07/25/85	07/25/85
8208	METRO CONTAINER 07/01/85	AA Cu		0.2 mg/l	07/24/85	07/24/85
8208	METRO CONTAINER 07/01/85	AA Zn		0.34 mg/l	07/18/85	07/18/85
8208	METRO CONTAINER 07/01/85	AA Al		3.21 mg/l	07/25/85	07/24/85
8208	METRO CONTAINER 07/01/85	AA Se		ND(0.008 mg/l)	07/23/85	07/23/85
8208	METRO CONTAINER 07/01/85	AA Pb		0.11 mg/l	07/22/85	07/22/85
8208	METRO CONTAINER 07/01/85	AA Sn		ND(0.3 mg/l)	07/17/85	07/17/85
8208	METRO CONTAINER 07/01/85	PHENOLICS		3.96 mg/l	07/16/85	07/22/85
8208	METRO CONTAINER 07/01/85	COD		1965 mg/l	07/11/85	07/11/85
8208	METRO CONTAINER 07/01/85	TDC		822 mg/l	07/17/85	07/17/85
8208	METRO CONTAINER 07/01/85	FOG		80 mg/l	07/16/85	07/16/85
8208	METRO CONTAINER 07/01/85	SULFIDE		4.3 mg/l	07/17/85	07/17/85
8208	METRO CONTAINER 07/01/85	pH		7.1	07/08/85	07/08/85
8208	METRO CONTAINER 07/01/85	TSS		130 mg/l	07/16/85	07/16/85
8208	METRO CONTAINER 07/01/85	TDS		18,230 mg/l	07/16/85	07/16/85
8208	METRO CONTAINER 07/01/85	BOD5		1000 mg/l	07/09/85	07/15/85
8208	METRO CONTAINER 07/01/85	CHLORIDE		9100 mg/l	07/18/85	07/22/85
8209	METRO CONTAINER 07/08/85	FOG		87 mg/l	07/16/85	07/16/85

ND = Not Detected (value reported is limit of detection)

APPROVED BY:

WILLIAM F. COWEN, PhD
SENIOR ANALYTICAL CHEMIST

1044

Page No. 1
06/04/85

STEARNS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE ANALYSIS STARTED	DATE ANALYSIS COMPLETED
7496	WASTEWATER 5/7/85	FOG	TOTAL	116 mg/l	05/10/85	05/10/85
7496	WASTEWATER 5/7/85	SULFIDE	TOTAL	ND (0.045 mg/l)	05/10/85	05/10/85
7467	EFFLUENT 4/30/85	FOG	TOTAL	113 MG/L	05/08/85	05/08/85
7467	EFFLUENT 4/30/85	BOD5	TOTAL	3520 MG/L	05/01/85	05/06/85
7467	EFFLUENT 4/30/85	COD	TOTAL	7900 MG/L	05/02/85	05/02/85
7467	EFFLUENT 4/30/85	PHENOLICS	TOTAL	6.5 MG/L	05/06/85	05/08/85
7467	EFFLUENT 4/30/85	CHLORIDE	TOTAL	13300 MG/L	05/07/85	05/07/85
7467	EFFLUENT 4/30/85	SULFIDE	TOTAL	CANCEL	/ /	/ /
7467	EFFLUENT 4/30/85	PH	TOTAL	6.4	05/01/85	05/01/85
7467	EFFLUENT 4/30/85	TSS	TOTAL	156 MG/L	05/06/85	05/06/85
7467	EFFLUENT 4/30/85	TDS	TOTAL	31060 MG/L	05/02/85	05/06/85
7467	EFFLUENT 4/30/85	AA FE	TOTAL	2.19 MG/L	05/08/85	05/08/85
7467	EFFLUENT 4/30/85	TOC	TOTAL	2470 mg/l	05/25/85	05/25/85
7467	EFFLUENT 4/30/85	AA Sn	TOTAL	ND (0.6 MG/L)	05/31/85	05/31/85
7467	EFFLUENT 4/30/85	AA Pb	TOTAL	0.25 MG/L	05/16/85	05/30/85
7467	EFFLUENT 4/30/85	AA Se	TOTAL	ND (0.04 MG/L)	05/22/85	05/22/85
7467	EFFLUENT 4/30/85	AA Al	TOTAL	3.32 MG/L	05/16/85	05/31/85
7467	EFFLUENT 4/30/85	AA CU	TOTAL	0.18 MG/L	05/08/85	05/08/85
7467	EFFLUENT 4/30/85	AA ZN	TOTAL	2.72 MG/L	05/08/85	05/08/85
7467	EFFLUENT 4/30/85	AA NI	TOTAL	0.16 MG/L	05/08/85	05/08/85
7467	EFFLUENT 4/30/85	CN	TOTAL	CANCEL	/ /	/ /

ND = Not Detected (value reported is limit of detection)

APPROVED BY:

William F. Comen
WILLIAM F. COMEN, PhD
SENIOR ANALYTICAL CHEMIST

Page No. 1
05/16/85

1053

STEARNS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE ANALYSIS STARTED	DATE ANALYSIS COMPLETED
7496	WASTEWATER 5/7/85	FOG	TOTAL	116 mg/l	05/10/85	05/10/85
7496	WASTEWATER 5/7/85	SULFIDE	TOTAL	ND (0.045 mg/l)	05/10/85	05/10/85

ND = Not Detected (value reported is limit of detection)

APPROVED BY:

William F. Comen

WILLIAM F. COMEN, PhD
SENIOR ANALYTICAL CHEMIST

Page No. 1
05/10/85

1044

STEARNS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE ANALYSIS STARTED	DATE ANALYSIS COMPLETED
7467	EFFLUENT 4/30/85	FDS	TOTAL	113 MG/L	05/08/85	05/08/85
7467	EFFLUENT 4/30/85	BOD5	TOTAL	3520 MG/L	05/01/85	05/06/85
7467	EFFLUENT 4/30/85	COD	TOTAL	7900 MG/L	05/02/85	05/02/85
7467	EFFLUENT 4/30/85	PHENOLICS	TOTAL	6.5 MG/L	05/06/85	05/08/85
7467	EFFLUENT 4/30/85	CHLORIDE	TOTAL	13300 MG/L	05/07/85	05/07/85
7467	EFFLUENT 4/30/85	SULFIDE	TOTAL	CANCEL	/ /	/ /
7467	EFFLUENT 4/30/85	PH	TOTAL	6.4	05/01/85	05/01/85
7467	EFFLUENT 4/30/85	TSS	TOTAL	156 MG/L	05/06/85	05/06/85
7467	EFFLUENT 4/30/85	TDS	TOTAL	31060 MG/L	05/02/85	05/06/85
7467	EFFLUENT 4/30/85	AA FE	TOTAL	2.19 MG/L	05/08/85	05/08/85
7467	EFFLUENT 4/30/85	AA CU	TOTAL	0.18 MG/L	05/08/85	05/08/85
7467	EFFLUENT 4/30/85	AA ZN	TOTAL	2.72 MG/L	05/08/85	05/08/85
7467	EFFLUENT 4/30/85	AA NI	TOTAL	0.16 MG/L	05/08/85	05/08/85
7467	EFFLUENT 4/30/85	CN	TOTAL	CANCEL	/ /	/ /
7496	WASTEWATER 5/7/85	SULFIDE	TOTAL	ND (0.045 MG/L)	05/10/85	05/10/85

ND = Not Detected (value reported is limit of detection)

APPROVED BY:

William F. Comen

WILLIAM F. COMEN, PhD
SENIOR ANALYTICAL CHEMIST

ORIGINAL
(Red)

Stearns
Catalytic

1833

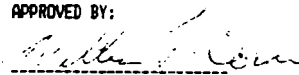
Page No. 1
05/01/85

STEARNS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE ANALYSIS STARTED	DATE ANALYSIS COMPLETED
7449	WWTP EFF TURB =85	4/26/85	3PM F06	TOTAL	273 mg/l	04/29/85 04/30/85
7450	WWTP EFF TURB =45	4/26/85	4PM F06	TOTAL	24 mg/l	04/29/85 04/30/85

ND = Not Detected (value reported is limit of detection)

APPROVED BY:


WILLIAM F. COWEN, PhD
SENIOR ANALYTICAL CHEMIST

WELCOMA
100 East Fifth Street
Chasler, Pennsylvania 19013

1. COMPANY NAME ALBERT C. GIBSONSON CORP.

STREET ADDRESS SECOND & PRICE STSCITY TRAINER STATE PA

ZIP 19016 PHONE NUMBER (215) 485-6100

PERMIT
NO. 01-01-644-02-02

S.I.C.
CODE 3412

DELGORA
MONTHLY REPORT FORM
OFFICIAL USE ONLY

OF DRUMS PROCESSED 33,882

MONTH AND YEAR	DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD ₅ mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	TOC mg/l	AL mg/l	Sn mg/l	Se mg/L	Wg/L	Pb Wt/L	REMARKS
Dec 1985	X	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			32
	1				.0211																										
	2				.0113																										
	3				.0245																										
	4				.0178																										
	5				.0291																										
	6				.0111																										
	7				-																										
	8				.0273																										
	9				.0153																										
	10				.0222																										
	11				.0150																										
	12				.0296																										
	13				.0117																										
	14				-																										
	15				.0190																										
	16				.0141																										
	17				.0210																										
	18				.0169																										
	19				.0143																										
	20				.0268																										
	21				-																										
	22				.0146																										
	23				.0096																										
	24				.0212																										
	25				.0233																										
	26				.0242																										
	27				.0151																										
	28				-																										
	29				.0157																										
	30			F	.0194	8.0	6.4	156	31000	3520	7900	6.5	10000	13300	-	2.14	0.18	2.72	0.16	-	-	-	113								
	31				-																										
					SOL																										
					.0195																										

ying Signatures

Testing Laboratory

Name STEARNS CATALYTIC Street Address 201 E 10TH ST Zip 19061

Signature William J. Cove SR ANAL CHEM Title _____ Signature Cole Title _____

HARRIS, HENRY E. COMPANY, 1911)

NAME: _____

CLLCORA

108 East Fifth Street
Chaster, Pennsylvania 19013

ORIGINAL
(Red)

COMPANY NAME METRO CONTAINER CORP
STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 485-6100

PERMIT
NO. 01-01-644-02-02
S.I.C.
CODE 3412

DELCORA
MONTHLY REPORT FORM
OFFICIAL USE ONLY

OF DRUMS PROCESSED 36 922

MONTH AND YEAR	DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD ₅ mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	TOC mg/l	AL mg/l	Sn mg/l	REMARKS
12/85	1	5																										
	2	6																										
	3	7																										
	4	8																										
	5	9																										
	6	10																										
	7	11																										
	8	12																										
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	29																											
	30																											
	31																											
TOTAL																												
VERAGE																												

Certifying Signatures

Company Name STEARNS CATALYTIC Street Address 201 E 10TH ST Zip 19061
City MARCUS HOOK State PA Phone No. (215) 485-5277

Testing Laboratory

Signature William F. Cowan SR ANAL CHEM Title Anal Chem Company Stearns Catalytic
Name WILLIAM F. COWAN, PHD Date 7/2/85 Title PE

DELCORA

100 East Fifth Street
Pittsburgh, Pennsylvania 15013

COMPANY NAME RETRO CONTAINER CORP

STREET ADDRESS SECOND & PRICE STS

CITY TRAINER STATE PA

ZIP 19016 PHONE NUMBER (215) 485-6100

PERMIT
NO. 01-01-444-02-02

S.I.C.
CODE 3412

DELCORA
MONTHLY REPORT FORM
OFFICIAL USE ONLY

OF DRUMS PROCESSED 4500

MONTH AND YEAR	DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	TOC mg/l	AL mg/l	Sn mg/l	SQ mg/l	REMARKS
JUNE '85	1	S																											
	2	W																											
	3	TH																											
	4	F																											
	5	S																											
	6	TH																											
	7	F																											
	8	S																											
	9	W																											
	10	TH																											
	11	F																											
	12	S																											
	13	TH																											
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	26	F																											
	27	S																											
	28	TH																											
	29	F																											
	30	S																											
	31	TH																											
	7/1	M																											
TOTAL																													
AVERAGE																													

Certifying Signatures

Testing Laboratory

Company Name STEARNS CATALYTIC Street Address 201 E 10TH ST Zip 19061
City MARCUS HOOK State PA

Signature William J. Low Title SR ANAL CHEM
Signature [Signature] Title PE

500 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS 500 E 5TH ST
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

NO. 01-01-
0644-02-02
S.I.C.
CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

OF 2005 Processed
35,504

DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD ₅ mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Bq mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	COLOR PCU	OTHER AL mg/l	OTHER Se mg/l	OTHER Pb mg/l	OTHER Ag mg/l	OTHER As mg/l	OTHER Cd mg/l
1	S			0.023																									
2	M			0.022																									
3	T			0.020																									
4	W			0.019																									
5	TH			0.023		7.6	388	1746	2800	6510	68.5	5.0	—	7640	0.036	6.79	0.36	5.21	0.19	0.54	1.27	0.25	161	1090	18.2	0.002	1.09	0.04	0.39
6	F			0.033																									
7	S			0.032																									
8	M			0.036																									
9	T			—																									
10	W			—																									
11	TH			0.037																									
12	F			0.071																									
13	S			0.021																									
14	M			0.022																									
15	T			0.034																									
16	W			—																									
17	TH			—																									
18	F			0.055																									
19	S			0.056																									
20	M			0.031																									
21	T			0.059																									
22	W			0.060																									
23	TH			—																									
24	F			—																									
25	S			0.081																									
26	M			0.070																									
27	T			0.035																									
28	W			0.090																									
29	TH																												
30	F																												
31	S																												
				0.081																									
				0.030																									

Verifying Signatures

Testing Laboratory

Company Name BCM LABORATORY Street Address 521 W GERMANTOWN PKWY 19401

City MORRISTOWN

State PA

Phone NO (215) 825-0447

Signature B.K. Brunner

Name B.K. Brunner

Lab Services Coordinator

Date 7/23/01

Signature G. Flynn

Name GARDNER K FLYNN, JR

Company

Original

Title

Date

101 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

PERMIT
NO. 01-01
0644-02-02
S.I.C.
CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

of Days (Business)
35 428

MONTH
AND
YEAR

JAN '85

DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	COLOR PCU mg/l	OTHER AM mg/l	OTHER SM mg/l	OTHER PM mg/l	REMARKS
1	T			.003																								
2	T			.002																								
3	W			.007																								
4	TH			.003																								
5	F			.002	60	8.5	1100	1140	1750	7740	22.5	1000		5750		4.0	0.1	0.2				1100						
6	S			—																								
7	S			—																								
8	SA			.003																								
9	SA			.003																								
10	SA			.002																								
11	SA			.003																								
12	S			.002																								
13	S			—																								
14	S			—																								
15	SA			.008																								
16	SA			.002																								
17	TH			.001																								
18	TH			.007																								
19	F			.008																								
20	S			.002																								
21	S			—																								
22	SA			.006																								
23	TH			.002																								
24	TH			.002																								
25	TH			.008																								
26	F			.005																								
27	S			.005																								
28	S			—																								
29	SA			.005																								
30	T			.004																								
31	TH			.006																								
				.007																								
				.004																								

Buying Signatures

Testing Laboratory

Buy Name BCM LABORATORY Street Address 521 W GERMANTOWN PK Zip 19401
CHESTER TOWN State PA

Signature R. K. Bulmer

Name R. K. Bulmer

Lab Services Coordinator

Title Lab Services Coordinator

Signature [Signature]

Company

Title



CHEM TEK SERVICES

PO BOX 1424 MALVERN PA 19355 (215)436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

10/27/86

Attn: Mr Mark S Cleveland, Pretreatment Program Supervisor

Subject: September 1986 Self-Monitoring Report

Dear Mark:

Attached please find subject report as required by our permit. Please let me know if you have any questions or comments on same.

Very truly yours,

Gardner K Flynn, Jr
Operations/Engineering
Consultant

100 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS SECOND & PRICE STS

CITY TRAINER STATE PA

ZIP 19016 PHONE NUMBER (215) 485-6100

PERMIT
NO. 01-01-644-02-02

S.I.C.
CODE 3412

MONTHLY REPORT FORM

OFFICIAL USE ONLY

OF DRUMS PROCESSED

MONTH AND YEAR	DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD ₅ mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	TOC mg/l	AL mg/l	Sn mg/l	Se mg/L	Pb mg/L	Ni mg/L	REMARKS	
ORIGINAL (Red) SEP '86	1	5																														
	2	6																														
	3	7																														
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	5	9																														
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	25	29																														
	26	30																														
	27	31																														
	TOTAL AVERAGE																															

Testing Signatures

Testing Laboratory

Company

Company STEARNS CATALYTIC Street Address 201 E 10TH ST Zip 19061

Signature

SR ANAL CHEM
Title

Signature

Title

City HOOK

State PA

Phone No (215) 485-5777

Name WILLIAM F COWAN, PHD
(Print or Type)

Date

Name GARDNER K FLYNN, JR
(Print or Type)

Date



CHEM TEK SERVICES
PO BOX 1424 MALVERN PA 19355 (215)436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

8/27/86

Attn: Mr Mark S Cleveland, Pretreatment Program Supervisor

Subject: July 1986 Monthly Self-Monitoring Report

Dear Mark:

Attached please find subject report as required by our permit. Please let me know if you have any questions or comments.

Very truly yours,

Gardner K Flynn, Jr
Operations/Engineering Consultant

DELCORA
100 East Fifth Street
Chester, Pennsylvania 19013

COMPANY NAME METRO CONTAINER CORP
STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 485-6100

PERMIT
NO. 01-01-644-02-02
S.I.C.
CODE 3412

DELCORA
MONTHLY REPORT FORM
OFFICIAL USE ONLY

OF DRUMS PROCESSED 35,132

DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD ₅ mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	TOC mg/l	AL mg/l	Sn mg/l	Se mg/l	Ar mg/l	REMARKS
July 1 '86																													
1	T				0.017																								
2	T				0.017																								
3	W				0.020																								
4	W				0.022																								
5	W																												
6	W																												
7	W				0.012																								
8	W				0.015																								
9	W				0.017																								
10	W				0.015																								
11	W				0.013																								
12	W																												
13	W																												
14	W				0.019																								
15	W				0.018																								
16	W				0.015																								
17	W				0.011																								
18	W				0.011																								
19	W																												
20	W																												
21	W				0.014																								
22	W				0.017																								
23	W				0.015																								
24	W				0.017																								
25	W				0.022																								
26	W																												
27	W																												
28	W																												
29	W				0.020																								
30	W				0.015																								
31	W				0.017																								
TOTAL					0.022																								
AVERAGE					0.018																								

1) Certifying Signatures

Testing Laboratory

Company Name STEARNS CATALYTIC Street Address 201 E 10TH ST Zip 19061

City MARTIN HUNY

Signature _____ Title SR ANAL CHEM
Name WILLIAM F. COWAN, PHD Date _____
Signature [Signature] Title PE
Name GARDNER K. FLYNN, JR Date _____



CHEM TEK SERVICES
PO BOX 1424 MALVERN, PA 19355 (215)436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

9/22/86

Attn: Mr Mark S Cleveland, Pretreatment Program Supervisor

Subject: August 1986 Monthly Self-Monitoring Report

Dear Mark:

Attached please find subject report as required by our permit. Please let me know if you have any questions or comments.

Very truly yours,

Gardner K Flynn, Jr
Operations/Engineering Consultant

SELCORA
100 East Fifth Street
Chester, Pennsylvania 19013

COMPANY NAME METRO CONTAINER CORP
STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 485-6100

PERMIT
NO. 01-01-644-02-02
S.I.C.
CODE 3412

DELUCA
MONTHLY REPORT FORM
OFFICIAL USE ONLY

OF DRUMS PROCESSED

GENERAL ANALYSIS (Red)	DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW (MGD)	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD ₅ mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	TOC mg/l	AL mg/l	Sn mg/l	Se mg/L	Pb mg/L	REMARKS		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32
	1	S			0.018																											
	2	S			0.02																											
	3	S																														
	4	S			0.017																											
	5	S			0.018																											
	6	S			0.016																											
	7	S			0.018																											
	8	S			0.021																											
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	11	S			0.015																											
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	19	S			0.013																											
	20	S			0.018																											
	21	S			0.017																											
	22	S			0.018	98	6.3	670	99.85	25.7	6520	3.76	61.0		23,100		1.18	0.47	576	5906			85		1843	476	0.6	24025	0.92			
	23	S			0.010																											
	24	S																														
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	26	S			0.017																											
	27	S			0.014																											
	28	S			0.013																											
	29	S			0.020																											
	30	S			0.011																											
	31	S																														
TOTAL																																
AVERAGE					0.017																											

1 Certifying Signatures

Testing Laboratory

Company Name STEARNS CATALYTIC Street Address 201 E 10TH ST Zip 19061
City MCCUS HOOK State PA Phone No (215) 485-5377

Signature _____ Title SR ANAL CHEM
Name WILLIAM F COWAN, PHD Date _____
Signature [Signature] Title _____
Name GARDNER K FLYNN, JR



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
L00 East Fifth St
Chester, Pa 19016

11/1/85

Attn: Mr William C Ross, Executive Director

Subject: Metro Container Corporation - Permit #01-01-644-02-02
Re: August 1985 USEPA Priority Pollutant Analysis Report

Dear Bill:

Enclosed please find subject report as required by the permit. Please note that the sample was taken 8/27/85 and we did not receive the results until 10/29/85. Stearns assures me that turnaround time should be within a month of sample submission. The sample for the November analysis will be submitted shortly to allow reporting by the end of November or early December.

Please let me know if there are any questions or comments on the enclosed.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer



STEARNS CATALYTIC CORPORATION

ORIGINAL
(Red)

A Company of Excellence
1955-1985

10/29/85

Mr. Gardner Flynn
P.O. Box 1424
Malvern, Penna. 19355

Subject: C.I. Contract No. 88178
Mr. Gardner Flynn
LABORATORY ANALYSIS

Dear Mr. Flynn:

Attached is the analytical report for sample
submitted to us 08/27/85.

The samples for "nickel" were analyzed as described
in the report and the the reporting value is noted.

If there are any questions, please do not hesitate
to contact me (215) 400-8877 or via mail (215) 804-0012.

William F. Cowen

WILLIAM F. COWEN, Ph.D.
Senior Analytical Chemist

1367

Page No. 1
10/29/85

STEARNS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE	DATE
					ANALYSIS STARTED	ANALYSIS COMPLETED
8529	EFFLUENT 08/27/85	AA Ag	TOTAL	0.24 MG/L	09/05/85	09/10/85
8529	EFFLUENT 08/27/85	AA AS	TOTAL	ND 10.000 MG/L	09/04/85	09/04/85
8529	EFFLUENT 08/27/85	AA BE	TOTAL	0.007 MG/L	09/05/85	09/11/85
8529	EFFLUENT 08/27/85	AA CD	TOTAL	0.17 MG/L	09/10/85	09/10/85
8529	EFFLUENT 08/27/85	AA CF	TOTAL	0.42 MG/L	09/09/85	09/09/85
8529	EFFLUENT 08/27/85	AA CU	TOTAL	0.00 MG/L	09/06/85	09/06/85
8529	EFFLUENT 08/27/85	AA Hg	TOTAL	ND 1.0000 MG/L	09/05/85	09/12/85
8529	EFFLUENT 08/27/85	AA NI	TOTAL	0.00 MG/L	09/05/85	09/11/85
8529	EFFLUENT 08/27/85	AA PL	TOTAL	0.03 MG/L	09/10/85	09/10/85
8529	EFFLUENT 08/27/85	AA SO	TOTAL	1.01 MG/L	09/05/85	09/11/85
8529	EFFLUENT 08/27/85	AA SE	TOTAL	ND 1.000 MG/L	09/05/85	09/10/85
8529	EFFLUENT 08/27/85	AA TI	TOTAL	0.00 MG/L	09/05/85	09/11/85
8529	EFFLUENT 08/27/85	AA ZR	TOTAL	0.00 MG/L	09/05/85	09/09/85
8529	EFFLUENT 08/27/85	GC/MS VOA		SEE ATTACHED	1/1	1/1
8529	EFFLUENT 08/27/85	GC/MS ACID/BIN		SEE ATTACHED	1/1	1/1
8529	EFFLUENT 08/27/85	GC/MS PEST/PCP		SEE ATTACHED	1/1	1/1

ND = Not Detected Value Rep'd due to limit of detection

APPROVED BY

William J. Howe

DATE OF REVIEW
10/29/85

ORIGINAL
(Red)

Stearns
Catalytic

Page No. 1
10/29/85

1507

STEARNS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE ANALYSIS STARTED	DATE ANALYSIS COMPLETED
6529	EFFLUENT 08/27/85	AA Ag	TOTAL	0.24 MG/L	09/03/85	09/10/85
6529	EFFLUENT 08/27/85	AA As	TOTAL	ND/0.025 MG/L	09/04/85	09/04/85
6529	EFFLUENT 08/27/85	AA Be	TOTAL	0.007 MG/L	09/05/85	09/11/85
6529	EFFLUENT 08/27/85	AA Cd	TOTAL	0.17 MG/L	09/10/85	09/10/85
6529	EFFLUENT 08/27/85	AA Cr	TOTAL	0.42 MG/L	09/09/85	09/09/85
6529	EFFLUENT 08/27/85	AA Cu	TOTAL	0.80 MG/L	09/09/85	09/09/85
6529	EFFLUENT 08/27/85	AA Hg	TOTAL	ND/0.0005 MG/L	09/09/85	09/12/85
6529	EFFLUENT 08/27/85	AA Ni	TOTAL	0.62 MG/L	09/09/85	09/11/85
6529	EFFLUENT 08/27/85	AA Pb	TOTAL	0.20 MG/L	09/09/85	09/09/85
6529	EFFLUENT 08/27/85	AA Se	TOTAL	1.01 MG/L	09/09/85	09/11/85
6529	EFFLUENT 08/27/85	AA Sn	TOTAL	ND/0.025 MG/L	09/09/85	09/11/85
6529	EFFLUENT 08/27/85	AA Ti	TOTAL	0.33 MG/L	09/09/85	09/11/85
6529	EFFLUENT 08/27/85	AA Zn	TOTAL	2.32 MG/L	09/09/85	09/09/85
6529	EFFLUENT 08/27/85	GC/MS VOA		SEE ATTACHED	1/1	1/1
6529	EFFLUENT 08/27/85	GC/MS ACID/BIA		SEE ATTACHED	1/1	1/1
6529	EFFLUENT 08/27/85	GC/MS PEST/PCP		SEE ATTACHED	1/1	1/1

ND = Not Detected Value Reported is Limit of Detection

APPROVED BY

William J. Howe

William J. Howe, P.E.

CEO of ANALYTICAL SERVICES



ANALYSIS REPORT

ORIGINAL

08:31:29/103732

WK2524 D 1 3

Lancaster Laboratories

LLI Sample No. WW 1011703

Catalytic, Inc., E.S.D. Lab
Marcus Hook Development Park
201 East 10th Street
Marcus Hook, PA 19061

Date Reported 9/26/85
Date Submitted 8/28/85
Discard Date 10/3/85
Collected by C
P.O. ADM-85-487
Rel.

8529 Liquid Sample
Collected on 8/27/85

Pesticides/PCB's

	RESULT AS RECEIVED		LIMIT OF DETECTION	LAB CODE
Alpha BHC	< 0.05	ppb	0.05	06090000
Beta BHC	< 0.05	ppb	0.05	06100000
Gamma BHC - Lindane	< 0.1	ppb	0.1	06110000
Delta BHC	< 0.05	ppb	0.05	06120000
Heptachlor	< 0.05	ppb	0.05	06130000
Aldrin	< 0.05	ppb	0.05	06140000
Heptachlor Epoxide	< 0.05	ppb	0.05	06150000
DDE	< 0.05	ppb	0.05	06160000
DDD	< 0.05	ppb	0.05	06170000
DDT	< 0.05	ppb	0.05	06180000
Dieldrin	< 0.2	ppb	0.2	06220000
Endrin	< 0.2	ppb	0.2	06230000
Chlordane	< 0.5	ppb	0.5	06250000
Toxaphene	< 5.	ppb	5.	06260000
Endosulfan I	< 0.2	ppb	0.2	06270000
Endosulfan II	< 0.2	ppb	0.2	06280000
Endosulfan Sulfate	< 0.6	ppb	0.6	06290000
Endrin Aldehyde	< 2.	ppb	2.	06380000
PCB-1016	< 5.	ppb	5.	06390000
PCB-1221	< 5.	ppb	5.	06400000
PCE-1232	< 5.	ppb	5.	06410000
PCB-1242	< 5.	ppb	5.	06420000
PCB-1248	< 5.	ppb	5.	06430000
PCB-1254	< 5.	ppb	5.	06440000
PCB-1260	< 5.	ppb	5.	06450000

1 COPY TO Catalytic, Inc., E.S.D. Lab ATTN: William F. Cowen

SEE REVERSE SIDE FOR EXPLANATION OF SYMBOLS AND ABBREVIATIONS

Respectfully Submitted
Lancaster Laboratories, Inc.
Reviewed and Approved by:

Richard C. Entz, B.A.
Group Leader, Organic Analysis

CCEA



ANALYSIS REPORT

ORIGINAL
(Red)

Lancaster Laboratories INCORPORATED

08-31-46 103732
WK2524 D 1 3

LLI Sample No. WW 1011703

Catalytic, Inc., E.S.D. Lab
Marcus Hook Development Park
201 East 10th Street
Marcus Hook, PA 19061

Date Reported 9/26/85
Date Submitted 8/28/85
Discard Date 10/ 3/85
Collected by C
P.O. ADM-85-487
Rel.

8529 Liquid Sample
Collected on 8/27/85

	RESULT AS RECEIVED		LIMIT OF DETECTION	LAE CODE
Acid Extractables				
2-chlorophenol	< 10.	ppb	10.	06460000
phenol	17,200.	ppb	10.	06550000
2-nitrophenol	18,900.	ppb	10.	06510000
2,4-dimethylphenol	< 10.	ppb	10.	06480000
2,4-dichlorophenol	< 10.	ppb	10.	06470000
4-chloro-3-methylphenol	< 10.	ppb	10.	06530000
2,4,6-trichlorophenol	< 10.	ppb	10.	06560000
2,4-dinitrophenol	< 25.	ppb	25.	06500000
4-nitrophenol	25,300.	ppb	25.	06520000
2-methyl-4,6-dinitrophenol	< 10.	ppb	10.	06490000
pentachlorophenol	90.	ppb	10.	06540000

No surrogate recoveries were obtained due to significant matrix effects.

1 COPY TO Catalytic, Inc., E.S.D. Lab ATTN: William F. Cowen

SEE REVERSE SIDE FOR EXPLANATION OF SYMBOLS AND ABBREVIATIONS

Respectfully Submitted
Lancaster Laboratories, Inc.
Reviewed and Approved by:

Nelson H. Bissler E.A.
Group leader - GC/MS

ANALYSIS REPORT 08:31:35 103732
WK2524 D 1ORIGINAL
(Red)*Lancaster Laboratories*

LLI Sample No. WW 1011723

Catalytic, Inc., E.S.D. Lab
Marcus Hook Development Park
201 East 10th Street
Marcus Hook, PA 19061

Date Reported 9/26/85
Date Submitted 8/28/85
Discard Date 10/3/85
Collected by C
P.O. ADM-85-487
Rel.

8529 Liquid Sample
Collected on 8/27/85

	RESULT		LIMIT OF	
	AS RECEIVED		DETECTION	LAB CODE
Purgables Method # 624				
Acrolein	< 1,000.	ppb	1000.	07340111
Acrylonitrile	< 1,000.	ppb	1000.	07350111
2-Chloroethylvinyl ether	< 100.	ppb	100.	07130111
Chloromethane	< 100.	ppb	100.	07110111
Bromomethane	< 100.	ppb	100.	07120111
Vinyl chloride	< 100.	ppb	100.	07140111
Chloroethane	< 100.	ppb	100.	07150111
Methylene chloride	< 100.	ppb	100.	07160111
1,1-Dichloroethene	< 100.	ppb	100.	07170111
1,1-Dichloroethane	< 100.	ppb	100.	07180111
trans-1,2-Dichloroethene	< 100.	ppb	100.	07190111
Chloroform	< 100.	ppb	100.	07200111
1,2-Dichloroethane	12,000.	ppb	100.	07210111
1,1,1-Trichloroethane	< 100.	ppb	100.	07220111
Carbon tetrachloride	< 100.	ppb	100.	07230111
Dichlorobromomethane	< 100.	ppb	100.	07240111
1,2-Dichloropropane	< 100.	ppb	100.	07250111
trans-1,3-Dichloropropene	< 100.	ppb	100.	07260111
Trichloroethene	< 100.	ppb	100.	07270111
Benzene	< 100.	ppb	100.	07280111
cis-1,3-Dichloropropene	< 100.	ppb	100.	07300111
1,1,2-Trichloroethane	< 100.	ppb	100.	07290111
Dibromochloromethane	< 100.	ppb	100.	07280111
Bromoform	< 100.	ppb	100.	07310111
Tetrachloroethene	< 100.	ppb	100.	07330111
1,1,2,2-Tetrachloroethane	< 100.	ppb	100.	07320111
Toluene	1,500.	ppb	100.	07040111
Chlorobenzene	< 100.	ppb	100.	07050111
Ethylbenzene	< 100.	ppb	100.	07060111
Fluorotrichloromethane	< 100.	ppb	100.	07900111

1 COPY TO Catalytic, Inc., E.S.D. Lab ATTN: William E. Cowen

SEE REVERSE SIDE FOR EXPLANATION OF SYMBOLS AND ABBREVIATIONS

Respectfully Submitted
Lancaster Laboratories, Inc.
Reviewed and Approved by:

Nelson H. Fisser E.A.
Group Leader - GEMS



ANALYSIS REPORT

ORIGINAL
(Red)

08:31:48 103732
WK2524 D 1 3

Lancaster Laboratories INCORPORATED

LLI Sample No. WW 1011703

Catalytic, Inc., E.S.D. Lab
Marcus Hook Development Park
201 East 10th Street
Marcus Hook, PA 19061

Date Reported 9/26/85
Date Submitted 8/28/85
Discard Date 10/ 3/85
Collected by C
P.O. ADM-85-487
Rel.

8529 Liquid Sample
Collected on 8/27/85

	RESULT AS RECEIVED	LIMIT OF DETECTION	LAB CODE
Base Neutrals			
N-nitrosodimethylamine	< 10. ppb	10.	06970000
bis (2-chloroethyl) ether	< 10. ppb	10.	06670000
1,3-dichlorobenzene	< 10. ppb	10.	06770000
1,4-dichlorobenzene	< 10. ppb	10.	06780000
1,2-dichlorobenzene	10. ppb	10.	06760000
bis (2-chloroisopropyl) ether	< 10. ppb	10.	06680000
hexachloroethane	< 10. ppb	10.	06920000
N-nitrosodi-n-propylamine	< 10. ppb	10.	06980000
nitrobenzene	< 10. ppb	10.	06960000
isophorone	220. ppb	10.	06940000
bis (2-chloroethoxy) methane	< 10. ppb	10.	06660000
1,2,4-trichlorobenzene	< 10. ppb	10.	07020000
naphthalene	90. ppb	10.	06950000
hexachlorobutadiene	< 10. ppb	10.	06900000
hexachlorocyclopentadiene	< 10. ppb	10.	06910000
2-chloronaphthalene	< 10. ppb	10.	06720000
acenaphthylene	< 10. ppb	10.	06580000
dimethyl phthalate	< 10. ppb	10.	06810000
2,6-dinitrotoluene	< 10. ppb	10.	06840000
acenaphthene	< 10. ppb	10.	06570000
2,4-dinitrotoluene	< 10. ppb	10.	06830000
fluorene	< 10. ppb	10.	06880000
4-chlorophenyl phenyl ether	< 10. ppb	10.	06730000
diethyl phthalate	< 10. ppb	10.	06800000
1,2-diphenylhydrazine	< 10. ppb	10.	06860000
N-nitrosodiphenylamine	< 10. ppb	10.	06990000
4-bromophenyl phenyl ether	< 10. ppb	10.	06700000
hexachlorobenzene	< 10. ppb	10.	06890000
phenanthrene	< 10. ppb	10.	07000000

1 COPY TO Catalytic, Inc., E.S.D. Lab ATTN: William F. Cowen

SEE REVERSE SIDE FOR EXPLANATION OF SYMBOLS AND ABBREVIATIONS

Respectfully Submitted
Lancaster Laboratories, Inc.
Reviewed and Approved by:

Nelson H. Risser B.A.
Group Leader - GC/MS



ANALYSIS REPORT 08:31:55 103732
WK2524 D 1 3

Lancaster Laboratories

LLI Sample No. WW 1011703

Catalytic, Inc., E.S.D. Lab
Marcus Hook Development Park
201 East 10th Street
Marcus Hook, PA 19061

Date Reported 9/26/85
Date Submitted 8/28/85
Discard Date 10/ 3/85
Collected by C
P.O. ADM-85-487
Rel.

8529 Liquid Sample
Collected on 8/27/85

	RESULT AS RECEIVED		LIMIT OF DETECTION	LAB CODE
Base Neutrals (cont)				
anthracene	< 10.	ppb	10.	06590000
di-n-butyl phthalate	< 10.	ppb	10.	06820000
fluoranthene	< 10.	ppb	10.	06870000
pyrene	< 10.	ppb	10.	07010000
benzidine	< 10.	ppb	10.	06600000
butyl benzyl phthalate	< 10.	ppb	10.	06710000
benzo (a) anthracene	< 10.	ppb	10.	06610000
chrysene	< 10.	ppb	10.	06740000
3,3'-dichlorobenzidine	< 10.	ppb	10.	06790000
bis (2-ethylhexyl) phthalate	40.	ppb	10.	06690000
di-n-octyl phthalate	< 10.	ppb	10.	06850000
benzo (b) fluoranthene	< 10.	ppb	10.	06630000
benzo (K) fluoranthene	< 10.	ppb	10.	06650000
benzo (a) pyrene	< 10.	ppb	10.	06620000
indeno (1,2,3-cd) pyrene	< 10.	ppb	10.	06930000
dibenzo (a,h) anthracene	< 10.	ppb	10.	06750000
benzo (ghi) perylene	< 10.	ppb	10.	06640000

1 COPY TO Catalytic, Inc., E.S.D. Lab ATTN: William F. Cowen

SEE REVERSE SIDE FOR EXPLANATION OF SYMBOLS AND ABBREVIATIONS

Respectfully Submitted
Lancaster Laboratories, Inc.
Reviewed and Approved by:

Nelson H. Risser B.A.
Group Leader - GC/MS

ORIGINAL
(Red)



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

DELCORA
PO BOX 999
100 East Fifth St
Chester, Pa 19016

9/10/85

Attn: Mr Kenneth L vogt, Jr, PE, Sr Staff Engineer

Subject: Self-Monitoring Reports - Metro Container Corp
Re: July/August Reports - August USEPA Priority Pollutant Report

Dear Ken:

Enclosed please find the completed July report and partial August report. As the results of the August sample is not complete, we are submitting available results as stated in our last correspondence. We are still awaiting results of the August sample for the USEPA Priority Pollutant report. As soon as we receive any results, we will forward those as soon as they are available.

In reviewing the July and August reports, please note that most parameters especially, pH and FOG are within specified limits, indicating a more consistent waste plant operation.

Please let me know if you have further questions or comments.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer

100 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 485-6100

PERMIT
NO. 01-01-644-02-02
S.I.C.
CODE 3412

DELUCA
MONTHLY REPORT FORM
OFFICIAL USE ONLY

OF DRUMS PROCESSED 29,935

MONTH AND YEAR	DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE °F	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD ₅ mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	TOC mg/l	AL mg/l	Sn mg/l	Se mg/l	BS mg/l	REMARKS
JULY '85	1	5																												
	2					.024																								
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	4					.026																								
	5																													
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	30					.016																								
	31					.045																								
TOTAL AVERAGE						.026																								
						5.7	14	33,000	210	4120	3.6	2.01		17,100		0.5	0.32	0.63					63	1350	2.14	0.17	2.0	0.21		

Certifying Signatures

Testing Laboratory

Company Name STEARNS CATALYTIC

Street Address 201 E 10TH ST

Zip 19061

Signature William F. Cowan

SR ANAL CHEM
Title

Name WILLIAM F. COWAN, PHD

Date

Signature Gardner K. Flynn

Name GARDNER K. FLYNN, JR

Company

Title

DELCOBA
100 East Fifth Street
Chester, Pennsylvania 19013

COMPANY NAME METRO CONTAINER CORP

STREET ADDRESS SECOND & PRICE STS

CITY TRAINER STATE PA

ZIP 19016 PHONE NUMBER (215)485-6100

PERMIT

NO. 01-01-644-02-07

S.I.C.

CODE 3412

DELCOBA

MONTHLY REPORT FORM

OFFICIAL USE ONLY

OF DRUMS PROCESSED

MONTH AND YEAR	DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD ₅ mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	TOC mg/l	AL mg/l	Sn mg/l	P ₂ mg/l	REMARKS
AUG 85	1	5																											
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TOTAL AVERAGE																													

Certifying Signatures

Testing Laboratory

Company Name STEARNS CATALYTIC

Street Address 201 E 10TH ST

ZIP 19061

Signature

SR ANAL CHEM
Title

Signature

Company

Title

MARCUS BOOK

Name WILLIAM P COWAN, PHD

CARDNER & PLYNN

ORIGINAL
(Red)



DELAWARE COUNTY REGIONAL WATER QUALITY CONTROL AUTHORITY
P.O. Box 999 • 100 East Fifth Street • Chester, Pa. 19016

October 22, 1986

Mr. Gardner Flynn
Metro Container Corporation
2nd & Price Streets
Chester, Pennsylvania 19013

Re: DELCORA Verification Monitoring

Dear Gardner:

In order to continue correspondence pertaining to DELCORA's verification monitoring, the following results are presented for your information. The purpose of such testing is to monitor permit compliance. In referring to the results table, please keep the following in mind:

- 1) * - permit violation
- 2) The so-called "3x" rule applies to grab samples.
- 3) The "3x" rule does not apply to volatile organic scans. A ceiling of 5 mg/l for individual pollutants and 30 mg/l sum total does apply.

As noted in previous correspondence, Pb continues to be over permit levels. Additional violations for this particular sample include Cd and 1,2-Dichloroethane.

Please do not neglect to notify this office as to the status of the two Priority Pollutant scans that are overdue. This is mentioned in the previous letter to you.

Your cooperation with DELCORA's industrial wastewater pretreatment program is appreciated. Do not hesitate to contact me if you have any questions.

Very truly yours,

Robert D. Plowman
Pretreatment Program Technician

RDP:cmd
Enclosure

cc: Metro V.A. File

DIRECT DIAL TELEPHONES (AREA CODE 215)

ADMINISTRATION
☐ 876-5524

CUSTOMER BILLING
☐ 876-5526

PURCHASING
☐ 494-4015

PLANT & MAINTENANCE
☐ 494-4016

ORIGINAL
(Red)

Date	Sample Type	Parameter	Result (mg/l)	DELCORA Limit (mg/l)
9-17-86	Grab	Pb	0.8 *	0.6
		Cr	0.2	15.0
		Cd	0.2 *	0.12
		FOG	249	300
		Penol	9.5	15
<hr/>				
		Chloromethane	less than 50	5.0
		Vinyl Chloride	Less than 50	5.0
		Bromomethane	less than 5	5.0
		Chloroethane	less than 5	5.0
		Methylene Chloride	492	5.0
		1,1,-Dichloroethylene	less than 5	5.0
		1,1,-Dichloroethane	less than 5	5.0
		Trans-1,2-Dichloroethylene	less than 5	5.0
		Chloroform	less than 5	5.0
		1,2-Dichloroethane	9710 *	5.0
		1,1,1-Trichloroethane	227	5.0
		Carbon Tetrachloride	24	5.0
		Bromodichloromethane	less than 5	5.0
		1,2-Dichloropropane	less than 5	5.0
		Trans-1,3-Dichloropropene	less than 5	5.0
		Trichloroethylene	68	5.0
		Benzene	54	5.0
		Cis-1,3-Dichloropropene	less than 5	5.0
		1,1,2-Trichloroethane	21.5	5.0
		Dibromochloroemethane	less than 5	5.0
		2-Chloroethyl Vinyl Ether	less than 5	5.0
		Bromoform	less than 5	5.0
		1,1,2,2-Tetrachloroethylene	64	5.0
		1,1,2,2-Tetrachloroethane	89	5.0
		Toluene	3610	5.0
		Chlorobenzene	47	5.0
		Ethylbenzene	141	5.0
		Acrolein	610	5.0
		Acrylonitrile	less than 50	5.0
		Sum Total	15.16 mg/l	30.0



DELAWARE COUNTY REGIONAL WATER QUALITY CONTROL AUTHORITY
P.O. Box 999 • 100 East Fifth Street • Chester, Pa. 19016

ORIGINAL
(Red)

November 13, 1986

Mr. Gardner Flynn
Metro Container Corporation
2nd and Price Streets
Trainer, Pennsylvania 19013

Re: DELCORA Verification Monitoring

Dear Gardner:

In continuing correspondence pertaining to DELCORA's verification monitoring of Metro's effluent, the results from five dates are presented. The results table notes only those parameters found to be in violation, with the exception of the organic scans which notes all detected species. Please keep in mind that the so called "3x" rule applies to grab samples with the exception of phenol and organic scans.

It should be noted that metal and phenol violations continue to be a significant factor in profiles of Metro's effluent. These violations range from just above to over seven times DELCORA's allowable limits.

The acid fraction and base/neutral scan results are from one sample. Applicable DELCORA limits are 5 mg/l for any one pollutant and 30 mg/l total for all pollutants. An extreme violation is evident for 2,4-Dichlorophenol. Another violation pertains to Isophorone. A total of 61.603 mg/l is derived from summing the acid fraction and base/neutral results. This also far exceeds the limit of 30 mg/l for organics. Please make every effort to keep the levels of these pollutants within the limits established by DELCORA.

Your cooperation with the industrial waste pretreatment program is appreciated. Please feel free to contact me if you have any questions.

Very truly yours,

Robert D. Plowman
Pretreatment Program Technician

RDP:cmd
Enclosure

cc: Metro V.M. File

X

ORIGINAL
(Red)

DELCORA VERIFICATION MONITORING TEST RESULT VIOLATIONS
INDUSTRY: Metro Container Corporation

DATE	SAMPLE TYPE	PARAMETER	METHOD	RESULT, (ug/l)	DELCORA LIMIT, (ug/l)
130 -Sep-86	Grab	Lead		1.8	0.6
9 -Oct-86:24 Hour Composite		Copper		0.2	0.2
6 -Oct-86:24 Hour Composite		Iron		6.7	3
8 -Oct-86:24 Hour Composite		Lead		1.2	0.2
9 -Oct-86:24 Hour Composite		Zinc		7.2	1
124 -Oct-86	Grab	Cadmium		0.172	0.12
124 -Oct-86	Grab	Copper		0.835	0.6
124 -Oct-86	Grab	Zinc		3.39	3
119 -Sep-86	Grab	Phenol	4AAF	5.3	5
130 -Sep-86	Grab	Phenol	4AAF	21	5
116 -Oct-86	Grab	Phenol		13.017	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	2-chlorophenol	Gas Chromatography	3.765	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	2,4-dimethylphenol	Gas Chromatography	1.073	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	2,4-dichlorophenol	Gas Chromatography	26.502	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	4,6-dinitro-o-cresol	Gas Chromatography	2.47	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	Pentachlorophenol	Gas Chromatography	2.04	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	Bis-2-chloromethyl ether	Gas Chromatography	1.323	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	1,4-dichlorobenzene	Gas Chromatography	1.237	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	N-nitrosodi-n-propylamine	Gas Chromatography	0.425	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	Nitrobenzene	Gas Chromatography	0.375	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	Isophorone	Gas Chromatography	5.355	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	Naphthalene	Gas Chromatography	0.267	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	2-chloronaphthalene	Gas Chromatography	0.121	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	2,6-dinitrotoluene	Gas Chromatography	0.295	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	2,4-dinitrotoluene	Gas Chromatography	0.135	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	Phenanthrene	Gas Chromatography	0.534	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	Di-n-butyl phthalate	Gas Chromatography	1.062	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	Geraniol	Gas Chromatography	1.565	5 (INDIVIDUAL COMPONENT)
116 -Oct-86	Grab	2,3-dichlorobenzene	Gas Chromatography	1.14	5 (INDIVIDUAL COMPONENT)
124 -Oct-86	Grab	Phenol	4AAF	11.4	5



CHEM TEK SERVICES
PO BOX 1424 MALVERN. PA 19355 (215)436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

11/7/86

Attn: Mr Mark S Cleveland, Pretreatment Program Supervisor

Subject: October 1986 Self-Monitoring Report Metro Container Corp, Trainer, Pa

Dear Mark:

Attached please find subject report as required by our permit. Please let me know if you have any questions or comments on same.

Very truly yours,

Gardner K Flynn, Jr
Operations/Engineering
Consultant

DELCORA
100 East Fifth Street
Chester, Pennsylvania 19013

COMPANY NAME NETRO CONTAINER CORP
STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215)485-6100

PERMIT
NO. 01-01-644-02-07
S.I.C.
CODE 3412

DELCORA
MONTHLY REPORT FORM
OFFICIAL USE ONLY

OF DRUMS PROCESSED

MONTH AND YEAR	DATE (Red)	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE OF	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	TOC mg/l	AL mg/l	Sn mg/l	DB mg/l	REMARKS
SEPT 92	1	5																											
	2	6																											
	3	7																											
	4	8																											
	5	9																											
	6	10																											
	7	11																											
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	31																												
TOTAL																													
AVERAGE																													

1) Certifying Signatures

Testing Laboratory

Company Name STEARNS CATALYTIC Street Address 201 E 10TH ST Zip 19061
City MANASSA HOOK State PA Phone No (215)485-5377

Signature _____ Title SR ANAL CHEM
Name WILLIAM F COWAN, PHD Date _____
Signature [Signature] Title PE
Name GARDNER K FLYNN, JR



CHEM TEK SERVICES
PO BOX 1424 MALVERN, PA 19355 (215)436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

12/19/86

Attn: Mr Robert D Plowman, Pretreatment Program Technician

Subject: November Self-Monitoring Report
Metro Container Corporation
Trainer, Pa

Dear Bob:

Enclosed please find subject report as required by the permit. Please direct any questions or comments to my attention. Thank you.

Very truly yours,

Gardner K Flynn, Jr.
Engineering/Operations
Consultant

DELLUKA

100 East Fifth Street

Chester, Pennsylvania 19013

COMPANY NAME RETRO CONTAINER CORPSTREET ADDRESS SECOND & PRICE STS.CITY TRAINER STATE PAZIP 19016 PHONE NUMBER (215) 485-6100

PERMIT

NO. 01-01-644-02-02

S.I.C.

CODE 3412

DELLUKA

MONTHLY REPORT FORM

OFFICIAL USE ONLY

OF DRUMS PROCESSED

MONTH AND YEAR	DATE	DAY OF THE WEEK	PRECIPITATION INCHES	TYPE OF SAMPLE	FLOW MGD	TEMPERATURE °F	PH	SUSPENDED SOLIDS mg/l	TOTAL DISSOLVED SOLIDS mg/l	BOD ₅ mg/l	COD mg/l	PHENOLS mg/l	SULFIDES mg/l	K - NITROGEN mg/l	CHLORIDES mg/l	MERCURY Hg mg/l	IRON Fe mg/l	COPPER mg/l	ZINC mg/l	NICKEL mg/l	CHROMIUM mg/l	CYANIDE mg/l	OIL AND GREASE mg/l	TURBIDITY J.T.U.	TOC mg/l	AL mg/l	SN mg/l	Se mg/l	Pb mg/l	REMARKS
Nov '86	1	5																												
	2	6																												
	3	7																												
	4	8																												
	5	9																												
	6	10																												
	7	11																												
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	29																													
	30																													
	31																													
TOTAL																														
AVERAGE																														

Certifying Signatures

Testing Laboratory

Company Name STEARNS CATALYTICStreet Address 201 E 10TH STZip 19061

Signature

SR ANAL CHEM

Title

Signature

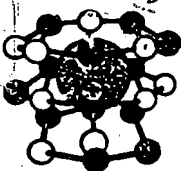
Company

Title

by MARCUS HOOKState PAPhone No (215) 485-5377Name WILLIAM F COWAN, PHD

Date

Name GARDNER K FLYNN, JRORIGINAL
FILED



"SOLUTIONS
START
HERE"

Stablex-Reutter Inc.

28 Sprindgale Road
P.O. Box 4201
Cherry Hill, NJ 08003

Phone: 609-541-6700
Telex: 834477

RECEIVED **OCT 23 1984**
REFER TO
ANSWER

ORIGINAL
(Red)

Client: Delcora

Date: October 18, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10278

Date Submitted: October 5, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil and Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

MCC 1400 10/3/84
- MCC 1400 10/5/84

900
650
1.7
10.67
570

Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

28 Springdale Road
P.O. Box 4201
Cherry Hill, NJ 08003

"SOLUTIONS
START
HERE"

Phone: 609-541-6700
Telex: 834477

RECEIVED OCT 23 1984

REMS. TO

ANALYST

ORIGINAL
(Red)

Client: Delcora

Date: October 18, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10262

Date Submitted: October 3, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

MCC 1400 10/1/84
- MCC 1400 10/3/84

Biochemical Oxygen Demand,

5-day (total), ug/ml

730

Oil and Grease, ug/ml

690

Phenolics, as phenol, ug/ml

1.1

pH, units

7.74; 7.74*

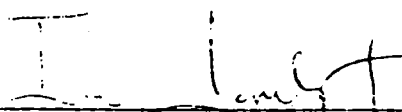
Total Suspended Solids, ug/ml

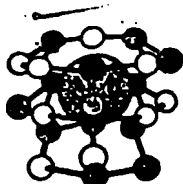
710

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectra suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. Copies of the infrared spectra are attached for your use.

*Duplicate Analysis


Ian C. Lambert
Laboratory Manager



"SOLUTIONS
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Stablex-Reutter Inc.

28 Springdale Road
P.O. Box 4201
Cherry Hill, NJ 08003

Phone: 609-541-6700
Telex: 834477

RECEIVED OCT 19 1984

REFER TO
ANSWD
ORIGINAL

Client: Delcora

Date: September 28, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10214

Date Submitted: September 21, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

MCC 1400 - 9/19/84 to 1400 - 9/21/84

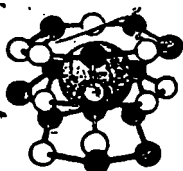
Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil & Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

1,200
1,800
1.4
11.85
760

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

"SOLUTIONS
START
HERE"

Phone: 609-541-6700
Telex: 834477

RECEIVED OCT 18 1984

REFER TO.....

ANSWD

ORIGINAL
(Red)

Client: Delcora
Address: 100 East 5th Street
Chester, PA 19103

Date: October 11, 1984
Project No.: SR10237
Date Submitted: September 26, 1984
Sampled By: Client
Number of Samples: 1
Sample Matrix: Aqueous

Contact: Ken Vogt

Analytical Results

Sample Designation

Parameter

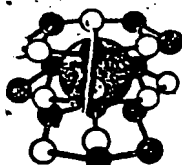
MCC 1400 - 9/24/84 to 1400 - 9/26/84

Biochemical Oxygen Demand, 5-day (total), ug/ml	200
Oil & Grease, ug/ml	23
Phenolics, as phenol, ug/ml	1.2
pH, units	2.86
Total Suspended Solids, ug/ml	16

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

" SOLUTIONS
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HERE "

PHONE: 609-541-6700
Telex: 834477

RECEIVED **OCT 18 1984**
REFER TO.....
ANSWD.....

ORIGINAL
(Red)

Client: Delcora
Address: 100 East 5th Street
Chester, PA 19103

Date: October 11, 1984
Project No.: SR10222
Date Submitted: September 24, 1984
Sampled By: Client
Number of Samples: 1
Sample Matrix: Aqueous

Contact: Ken Vogt

Analytical Results

Sample Designation

Parameter

MCC 1400 - 9/21/84 to 1400 - 9/24/84

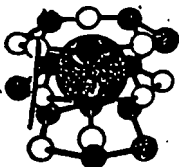
Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil & Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

150
1,000
<1
9.86
250

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

Ian C. Lambert
Laboratory Manager



" SOLUTIONS
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Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

Phone: 609-541-6700
Telex: 834477

RECEIVED OCT 12 1984
REFER TO.....
ANSWD.....

ORIGINAL
(Red)

Client: Delcora
Address: 100 East 5th Street
Chester, PA 19103

Date: September 28, 1984
Project No.: SR10182
Date Submitted: September 17, 1984
Sampled By: Client
Number of Samples: 1
Sample Matrix: Aqueous

Contact: Ken Vogt

Analytical Results

Sample Designation

Parameter

MCC 1400 - 9/14/84 to 1400 - 9/17/84

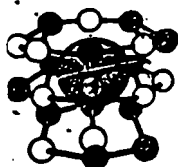
Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil & Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

560
920
0.46
12.15
990

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

28 Springdale Road
P.O. Box 4201
Cherry Hill, NJ 08003

"SOLUTIONS
START
HERE"

RECEIVED OCT 12 1984

Telex: 834477

REFER TO:
ANSWD:
ORIGINAL
(Red)

Client: Delcora

Date: September 28, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10196

Date Submitted: September 19, 1984

Sampled By: , Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter


MCC 1400 - 9/17/84 to 1400 - 9/19/84

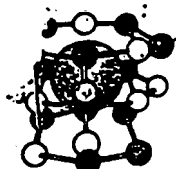
Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil & Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

1,000
280
1.6
9.22
150

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.


Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

"SOLUTIONS
START
HERE"

Phone: 609-541-6700
Telex: 834477

RECEIVED 09/12/84
REFER TO
ANSWD

ORIGINAL
(Red)

Client: Delcora

Date: September 28, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10179

Date Submitted: September 14, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

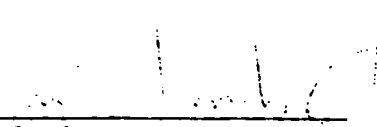
MCC - 9/12/84 to 9/14/84

Biochemical Oxygen Demand, 5-day (total), ug/ml	730
Oil & Grease, ug/ml	990
Phenolics, as phenol, ug/ml	3.1
pH, units	10.17*
Total Suspended Solids, ug/ml	510; 550*

* Duplicate Analysis

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.


Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

"SOLUTIONS
START
HERE"

RECEIVED 09/12/1984

Phone: 609-541-6700
Telex: 834477

REFER TO.....

ANSWD.....

ORIGINAL
(Red)

Client: Delcora

Date: September 28, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10168

Date Submitted: September 12, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

¹⁰
MCC 1400 - 9/9/84 to 1400 - 9/12/84

Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil & Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

920
1,600
3.3
11.94
1,300

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

Ian C. Lambert
Laboratory Manager

Stablex-Reutter Inc.

28 Springdale Road
P.O. Box 4201
Cherry Hill, NJ 08003

RECEIVED OCT 17 1984

REFER TO ORIGINAL
ANSWD (Red)

Client: Delcora

Address: 100 East 5th Street
Chester, PA 19103

Contact: Ken Vogt

Date: September 28, 1984

Project No.: SR10159

Date Submitted: September 10, 1984

Sampled By: Client

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

MCC 1400 - 9/7/84 to 1400 - 9/10/84

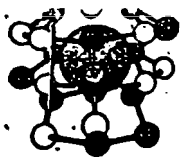
Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil & Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

690
1,800
4.3
12.16
87

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

Ian C. Lambert
Laboratory Manager



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Stablex-Reutter Inc.

28 Springdale Road
P.O. Box 4201
Cherry Hill, NJ 08003

RECEIVED **OCT 12 1984**
REFER TO.....
ANSWD.....

ORIGINAL
(Red)

Client: Delcora
Address: 100 East 5th Street
Chester, PA 19103

Date: September 28, 1984

Project No.: SR10159

Date Submitted: September 10, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter


MCC 1400 - 9/7/84 to 1400 - 9/10/84

Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil & Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

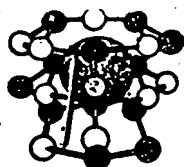
690
1,800
4.3
12.16
87

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.



Ian C. Lambert
Laboratory Manager



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Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

Phone: 609-541-6700
Telex: 834477

RECEIVED 112 1984
REFER TO
ANSWER

ORIGINAL
(Red)

Client: Delcora
Address: 100 East 5th Street
Chester, PA 19103

Date: September 28, 1984
Project No.: SR10151
Date Submitted: September 7, 1984
Sampled By: Client
Number of Samples: 1
Sample Matrix: Aqueous

Contact: Ken Vogt

Analytical Results

Sample Designation

Parameter

MCC 1400 - 9/4/84 to 1400 - 9/7/84

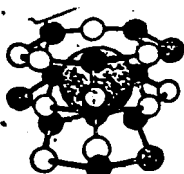
Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil & Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

390
460
3.0
12.17
440

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

"SOLUTIONS
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HERE"

REFER TO.....

ANSWD.....

Telex: 834477

ORIGINAL
(Red)

Client: Delcora

Date: September 28, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10139

Date Submitted: September 4, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter


MCC 1400 8/31 - 1400 9/3/84

Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil & Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

1,100
7,800
3.4
12.22
1,100

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.



Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

"SOLUTIONS
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RECEIVED 1304

Telex: 834477

REFER TO

ANSWD

ORIGINAL
(Red)

Client: Delcora

Date: September 28, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10131

Date Submitted: August 31, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

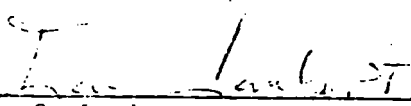
MCC 8/29 - 8/31

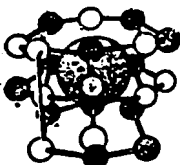
Biochemical Oxygen Demand, 5-day (total), ug/ml	1,500
Oil & Grease, ug/ml	1,500
Phenolics, as phenol, ug/ml	3.4
pH, units	12.30; 12.20*
Total Suspended Solids, ug/ml	870

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

*Duplicate Analysis


Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

"SOLUTIONS
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OCT 12 1984
RECEIVED
REFER TO
ANSWD

Phone: 609-541-6700
Telex: 834477

ORIGINAL
(Red)

Client: Delcora

Date: September 28, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10122

Date Submitted: August 29, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

1400 8/27 - 1400 8/29

Biochemical Oxygen Demand,
5-day (total), ug/ml

1,300

Oil & Grease, ug/ml

1,600

Phenolics, as phenol, ug/ml

4.2

pH, units

3.64

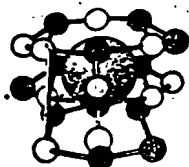
Total Suspended Solids, ug/ml

1,400

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

Tan C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

"SOLUTIONS
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Phone: 609-541-6700
Telex: 834477

RECEIVED OCT - 9 1984 ORIGINAL (Red)
REFER TO
ANSWD

Client: Delcora
Address: 100 East 5th Street
Chester, PA 19103

Date: September 28, 1984
Project No.: SR10108
Date Submitted: August 28, 1984
Sampled By: Client
Number of Samples: 3
Sample Matrix: Aqueous

Contact: Ken Vogt

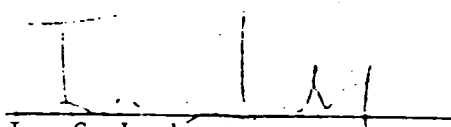
Analytical Results

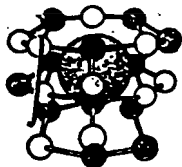
<u>Parameter</u>	<u>Sample Designation</u>		
	<u>8/24 - 8/27</u> <u>1300 - 1300</u>	<u>8/26</u> <u>1300 - 1600</u>	<u>8/27</u> <u>0400 - 0700</u>
Biochemical Oxygen Demand, 5-day (total), ug/ml	900	NR	NR
Oil & Grease, ug/ml	350	NR	NR
Phenolics, as phenol, ug/ml	1.6	NR	NR
pH, units	6.20	2.54	2.08
Total Suspended Solids, ug/ml	270	NR	NR

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

NR - Not Requested


Ian C. Lambert
Laboratory Manager



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Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

RECEIVED UCT - 9 1984
REFER TO.....
ANSWD.....

Phone: 609-541-6700
Tele: 834477

ORIGINAL
(Red)

Client: Delcora

Address: 100 East 5th Street
Chester, PA 19103

Contact: Ken Vogt

Date: September 28, 1984

Project No.: SR10097

Date Submitted: August 24, 1984

Sampled By: Client

Number of Samples: 2

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

Biochemical Oxygen Demand,
5-day (total), ug/ml
Oil & Grease, ug/ml
Phenolics, as phenol, ug/ml
pH, units
Total Suspended Solids, ug/ml

MCC 1200 8/22/84
- 1200 8/24/84

1,300
1,500
7.9
6.71
1,400

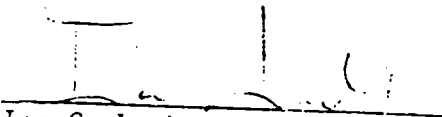
MCC 1000 -
1200 8/23/84

NR
NR
NR
3.25
NR

Infrared Analysis

The infrared spectrum shows the absence of any significant organic functional groups. The overall appearance of the spectrum suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

NR - Not Requested


Ian C. Lambert
Laboratory Manager

Stablex-Reutter Inc.

28 Springdale Road
P.O. Box 4201
Cherry Hill, NJ 08003

RECEIVED OCT 18 1984

REFER TO.....

ANSWD.....

ORIGINAL
(P-4)

Client: Delcora

Date: October 11, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10079

Date Submitted: August 22, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 1

Sample Matrix: Aqueous

Analytical Results

Sample Designation

8/22 - 8/22
1400 - 1200

Parameter

pH, units

8.15

Biochemical Oxygen Demand,
5-day (total), ug/ml

1,400

Total Suspended Solids, ug/ml

500

Oil & Grease, ug/ml

640

Petroleum Hydrocarbons, ug/ml

580

Phenolics, as phenol, ug/ml

7.8

Ian C. Lambert
Laboratory Manager

Stablex-Reutter Inc.

28 Springdale Road
P.O. Box 4201
Cherry Hill, NJ 08003

SEP 17 1984

ORIGINAL
(Red)

"SOLUTIONS
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Client: Delcora

Date: September 11, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10064

Date Submitted: August 21, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 2

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

pH, units
Biochemical Oxygen Demand,
5-day total, ug/ml
Total Suspended Solids, ug/ml
Oil & Grease, ug/ml
Petroleum Hydrocarbons, ug/ml
Phenolics, as phenol, ug/ml

1200 8/17/84 -
1200 8/20/84

0000 8/19/84 -
0300 8/19/84

10.01

13.02

1,800

2,400

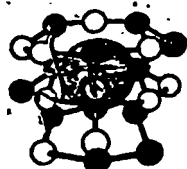
3,800

5,500

76

Ian C. Lambert
Laboratory Manager

ICL/md



Stablex-Reutter Inc.

Ninth and Cooper Streets
P.O. Box 499
Camden, New Jersey 08101

"SOLUTIONS
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Phone: 609-541-6700
Telex: 834477

OCT 12 1984
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ORIGINAL
(Red)

Client: Delcora

Date: September 28, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR10005

Date Submitted: August 10, 1984

Sampled By: Client

Number of Samples: 5

Contact: Ken Vogt

Sample Matrix: Aqueous

Re: Metro Container Corp.

Analytical Results

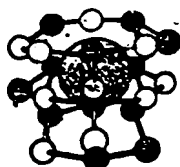
<u>Parameter</u>	<u>Sample Designation</u>				
	MCC 1400 8/8 1400 8/10	MCC 1400 8/8 1400 8/10	MCC 0800- 1400 8/9	MCC 0200- 0400 8/10	MCC 0600- 0800 8/10
Total Suspended Solids, ug/ml	2,900	940	---	---	---
Phenolics, as phenol, ug/ml	5.6	4.4; 4.3*	---	---	---
Biochemical Oxygen Demand, 5-day (total), ug/ml	1,600	1,200	---	---	---
pH, units	11.91	11.95	---	---	---
Oil & Grease, ug/ml	2,700	2,400	1,700	4.54	4.34; 4.37*

Infrared Analysis

The infrared spectra shows the absence of any significant organic functional groups. The overall appearance of the spectra suggests the presence of small amounts of hydrocarbons, possibly either oils and/or greases. A copy of the infrared spectrum is attached for your use.

* Duplicate Analysis

Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

"SOLUTIONS
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28 Springdale Road
P.O. Box 4201
Cherry Hill, NJ 08003

RECEIVED **OCT - 1 1984**
REFER TO
ANSWER

Phone: 609-541-6700
Telex: 834477

ORIGINAL
(Red)

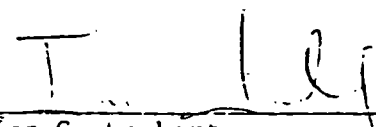
Client: Delcora
Address: 100 East 5th Street
Chester, PA 19103
Contact: Ken Vogt
Re: Metro Container Corp.

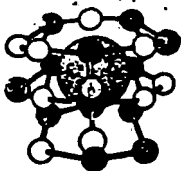
Date: September 24, 1984
Project No.: SR9991
Date Submitted: August 8, 1984
Sampled By: Client
Number of Samples: 2
Sample Matrix: Aqueous

Analytical Results

<u>Parameter</u>	<u>Sample Designation</u>	
	1400-1600 8/6 1000-1800 8/7	1400 8/6 1400 8/8
Total Suspended Solids, ug/ml	NR	660
Phenolics, as phenol, ug/ml	NR	4.4
Biochemical Oxygen Demand, 5-day (total), ug/ml	NR	3,300
pH, units	NR	12.45
Oil and Grease, ug/ml	2,200	NR
Petroleum Hydrocarbons, total, by IR, ug/ml	NR	650

NR - Not Requested


Ian C. Lambert
Laboratory Manager



Stablex-Reutter Inc.

28 Springdale Road
P.O. Box 4201
Cherry Hill, NJ 08003

"SOLUTIONS
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Office: 609-541-6700
(Ref): 834477

RECEIVED SEP 17 1984

REFER TO.....

ANSWD.....

Client: Delcora

Date: September 11, 1984

Address: 100 East 5th Street
Chester, PA 19103

Project No.: SR9984

Date Submitted: August 7, 1984

Sampled By: Client

Contact: Ken Vogt

Number of Samples: 4

Sample Matrix: Aqueous

Analytical Results

Sample Designation

Parameter

Phenolics, as phenol, ug/ml
Total Suspended Solids, ug/ml
Biochemical Oxygen Demand,
5-day (total), ug/ml
pH, units
Petroleum Hydrocarbons, ug/ml
Oil & Grease, ug/ml

8-1-84 (1400)-
8-3-84 (0900)

0.12; 0.11*
2,500; 2,300*

1,100; 1,300*
7.03

1,100
1,300

8-3-84 (1000)-
8-6-84 (0100)

5.9
970
1,600
11.93

2,000
1,000

8-5-84 (1000)-
8-6-84 (0100)

4.3
2,100
2,200
11.79; 11.86*
2,000
2,300

*Duplicate Analysis

Ian C. Lambert
Laboratory Manager



CHEM TEK SERVICES

PO BOX 1424 MALVERN. PA 19355 (215)436-4161

ORIGINAL
(Red)

DELCORA

12/19/86

PO Box 999

100 East Fifth St

Chester, Pa 19016

Attn: Mr Robert D Plowman, Pretreatment Program Technician

Subject: August-September Quarterly USEPA Priority Analysis Report
Metro Container Corporation, Trainer, Pa

Dear Bob:

Enclosed please find subject report as required by the existing permit.
Please let us know if you have any questions or comments on this report
or if there are any other concerns.

Very truly yours,

Gardner K Flynn, Jr
Engineering/Operations
Consultant

ORIGINAL
(Red)

Stearns Catalytic

STEARNS CATALYTIC CORPORATION

12/15/86

Mr. Gardner Flynn
P.O. Box 1424
Malvern, Penna. 19355

Subject: C.I. Contract No. 99978
Mr. Gardner Flynn
LABORATORY ANALYSIS

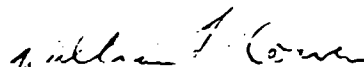
Dear Mr. Flynn:

Attached is the analytical report for samples
submitted to us 10/23/86.

The samples "as received" were handled as described
in the report and the the reporting basis is noted.

If there are any questions, please do not hesitate
to contact me (215) 485-5377 or Joe Watt (215) 864-8542.

Very truly yours,



William F. Cowen, PhD.
Senior Analytical Chemist

Page No. 1
12/15/86

2478

STEARNS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE ANALYSIS STARTED	DATE ANALYSIS COMPLETED
13324	WWTP EFFLUENT	AA Ag	TOTAL	0.82 mg/l	10/27/86	10/27/86
13324	WWTP EFFLUENT	AA Al	TOTAL	3.79 mg/l	11/03/86	11/03/86
13324	WWTP EFFLUENT	AA As	TOTAL	0.082 mg/l	10/30/86	10/30/86
13324	WWTP EFFLUENT	AA Be	TOTAL	ND(0.01 mg/l)	11/04/86	11/04/86
13324	WWTP EFFLUENT	AA Cd	TOTAL	0.092 mg/l	10/27/86	10/27/86
13324	WWTP EFFLUENT	AA Cr	TOTAL	0.71 mg/l	10/27/86	10/27/86
13324	WWTP EFFLUENT	AA Cu	TOTAL	0.242 mg/l	10/28/86	10/28/86
13324	WWTP EFFLUENT	AA Fe	TOTAL	1.21 mg/l	10/29/86	10/29/86
13324	WWTP EFFLUENT	AA Hg	TOTAL	ND(0.001 mg/l)	10/23/86	10/23/86
13324	WWTP EFFLUENT	AA Ni	TOTAL	ND(0.05 mg/l)	10/29/86	10/29/86
13324	WWTP EFFLUENT	AA Pb	TOTAL	6.34 mg/l	10/27/86	10/27/86
13324	WWTP EFFLUENT	AA Sb	TOTAL	1.47 mg/l	11/04/86	11/04/86
13324	WWTP EFFLUENT	AA Se	TOTAL	ND(0.025 mg/l)	10/30/86	10/30/86
13324	WWTP EFFLUENT	AA Sn	TOTAL	ND(0.6 mg/l)	11/03/86	11/03/86
13324	WWTP EFFLUENT	AA Ti	TOTAL	ND(0.09 mg/l)	11/04/86	11/04/86
13324	WWTP EFFLUENT	AA Zn	TOTAL	33.7 mg/l	10/28/86	10/28/86
13324	WWTP EFFLUENT	CN		0.453 mg/l	10/30/86	11/04/86
13324	WWTP EFFLUENT	GC/MS ACID		SEE ATTACHED	10/23/86	12/12/86
13324	WWTP EFFLUENT	GC/MS B/N		SEE ATTACHED	10/23/86	12/12/86
13324	WWTP EFFLUENT	GC/MS PEST/PCBS		SEE ATTACHED	10/23/86	12/12/86
13324	WWTP EFFLUENT	GC/MS VOA		SEE ATTACHED	10/23/86	12/12/86

ND = Not Detected (value reported is limit of detection)

APPROVED BY:

William F. Cowen

WILLIAM F. COWEN, PhD
SENIOR ANALYTICAL CHEMIST

CERTIFICATE OF ANALYSIS

Summary of Organic Priority Pollutant Analysis

ORIGINAL
(Red)

CLIENT	Stearns Catalytic	DATE RECEIVED	10-23-86
CLIENT I.D.	13324	DATE ANALYZED	11-15-86
RMC I.D.	3448-86	ANALYZED BY	TED

BASE/NEUTRAL COMPOUNDS

	<u>µg/l</u>		<u>µg/l</u>
n-nitrosodimethylamine	NA	4-chlorophenyl phenyl ether	<10 ND
bis(2-chloroethyl)ether	<10 ND	n-nitrosodiphenylamine	27.2
1,3-dichlorobenzene	<10 ND	1,2-diphenylhydrazine	<10 ND
1,4-dichlorobenzene	<10 ND	4-bromophenyl phenyl ether	<10 ND
1,2-dichlorobenzene	13.9	hexachlorobenzene	<10 ND
bis(2-chloroisopropyl)ether	154	phenanthrene	<10
hexachloroethane	<10 ND	anthracene	<10
n-nitrosodi-n-propylamine	<10 ND	di-n-butyl phthalate	13.6
nitrobenzene	<10 ND	fluoranthene	<10 ND
isophorone	112	benzidine	-
bis(2-chloroethoxy)methane	<10	pyrene	<10
1,2,4-trichlorobenzene	<10	butyl benzyl phthalate	<10
naphthalene	61.8	benz(a)anthracene	<10 ND
hexachlorobutadiene	<10 ND	chrysene	<10 ND
hexachlorocyclopentadiene	<10 ND	3,3'-dichlorobenzidine	<20 ND
2-chloronaphthalene	<10 ND	bis(2-ethylhexyl)phthalate	124
acenaphthylene	<10 ND	di-n-octyl phthalate	43.4
dimethyl phthalate	<10 ND	benzo(b)fluoranthene	<10 ND
2,6-dinitrotoluene	<10 ND	benzo(k)fluoranthene	<10 ND
acenaphthene	<10 ND	benzo(a)pyrene	<10 ND
2,4-dinitrotoluene	201	indeno(1,2,3-c,d)pyrene	<10 ND
fluorene	<10	dibenz(a,h)anthracene	<10 ND
diethyl phthalate	<10 ND	benzo(g,h,i)perylene	<10 ND
		2,3,7,8-tetrachlorodibenzo-p-dioxin	<10 ND

x ND= Not detected, value indicates minimum quantifiable limit.

< x = Detected but at a concentration less than the minimum quantifiable limit indicated.

Approved by: _____

CERTIFICATE OF ANALYSIS

ORIGINAL
(Red)

Summary of Organic Priority Pollutant Analysis

CLIENT	<u>Stearns Catalytic</u>	DATE RECEIVED	<u>10/23/86</u>
CLIENT I.D.	<u>13324</u>	DATE ANALYZED	<u>11/15/86</u>
RMC I.D.	<u>3448-86</u>	ANALYZED BY	<u>TED</u>

ACID COMPOUNDS

	<u>µg/l</u>
phenol	<u><10 ND</u>
2-chlorophenol	<u><10 ND</u>
2-nitrophenol	<u>32.2</u>
2,4-dimethylphenol	<u><10 ND</u>
2,4-dichlorophenol	<u><10 ND</u>
4-chloro-3-methylphenol	<u><10 ND</u>
2,4,6-trichlorophenol	<u><10 ND</u>
2,4-dinitrophenol	<u><50 ND</u>
4-nitrophenol	<u><50 ND</u>
2-methyl-4,6-dinitrophenol	<u><50 ND</u>
pentachlorophenol	<u><50 ND</u>

<x ND = Not detected, value indicates minimum quantifiable limit.

<x = Detected but at a concentration less than the minimum quantifiable limit indicated.

Approved By: *[Signature]*

CERTIFICATE OF ANALYSIS

ORIGINAL
(Red)

Summary of Organic Priority Pollutant Analysis

CLIENT	<u>Stearns Catalytic</u>	DATE RECEIVED	<u>10/23/86</u>
CLIENT I.D.	<u>13324</u>	DATE ANALYZED	<u>11/15/86</u>
RMC I.D.	<u>3448-86</u>	ANALYZED BY	<u>TED</u>

PESTICIDES

	<u>µg/l</u>		<u>µg/l</u>
a-BHC	<u><20 ND</u>	4,4'-DDD	<u><20 ND</u>
g-BHC	<u><20</u>	endrin aldehyde	<u><20 ND</u>
b-BHC	<u><20 ND</u>	endosulfan sulfate	<u><20 ND</u>
d-BHC	<u><20 ND</u>	4,4'-DDT	<u><20 ND</u>
heptachlor	<u><20 ND</u>	chlordane	<u><25 ND</u>
aldrin	<u><20 ND</u>	toxaphene	<u><25 ND</u>
heptachlor epoxide	<u><20 ND</u>	PCB - 1016	<u><10 ND</u>
endosulfan I	<u>55.9</u>	PCB - 1221	<u><10 ND</u>
4,4'-DDE	<u><20 ND</u>	PCB - 1232	<u><10 ND</u>
dieldrin	<u><20 ND</u>	PCB - 1242	<u><10 ND</u>
endrin	<u><20 ND</u>	PCB - 1248	<u><10 ND</u>
endosulfan II	<u><50 ND</u>	PCB - 1254	<u><10 ND</u>
		PCB - 1260	<u><10 ND</u>

<x ND = Not detected, value indicates minimum quantifiable limit.

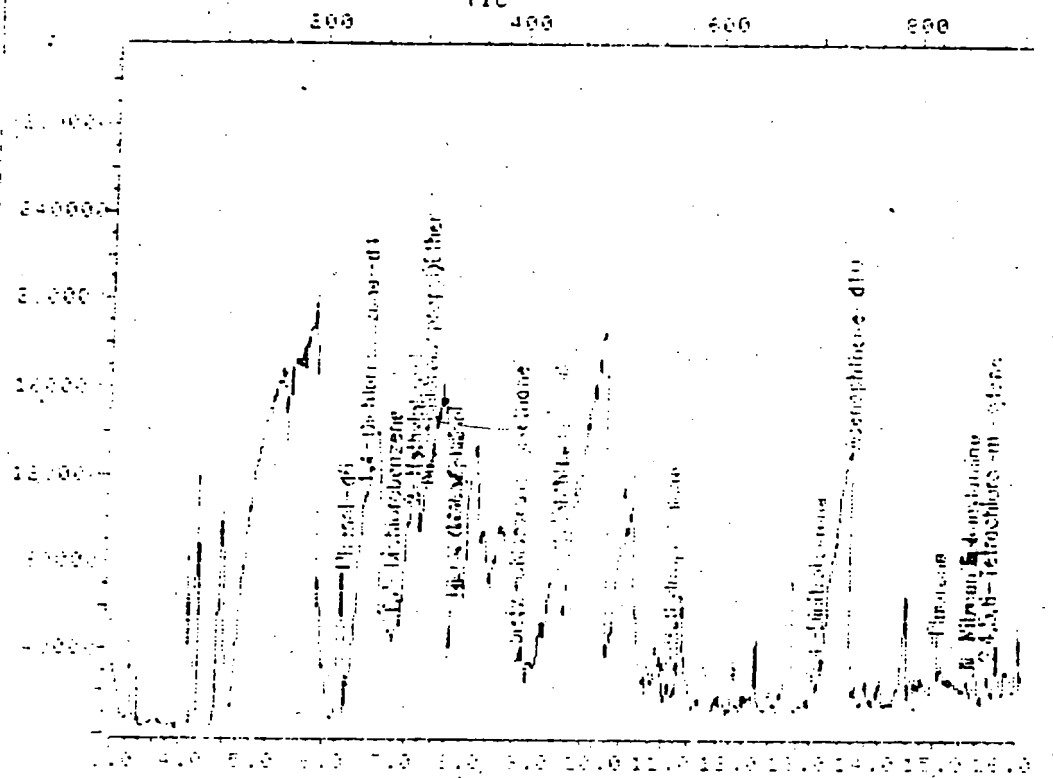
<x = Detected but at a concentration less than the minimum quantifiable limit indicated.

Approved By: _____

TOTAL ION CHROMATOGRAM

File # 6271 40.0-450.0 ann. ENC# 3448-88 11/14/88-GN-11/10/88
TIC

TIC

[illegible]Page 15 of 15
 15-00000-01

12-11-1964

ETL: 41-

44-38861-1500

File: 011-0-30-1207-AL-70010101

Call duration: 0:12:17:35

Accession ID: 1044

Start Time: 8:12:13:23

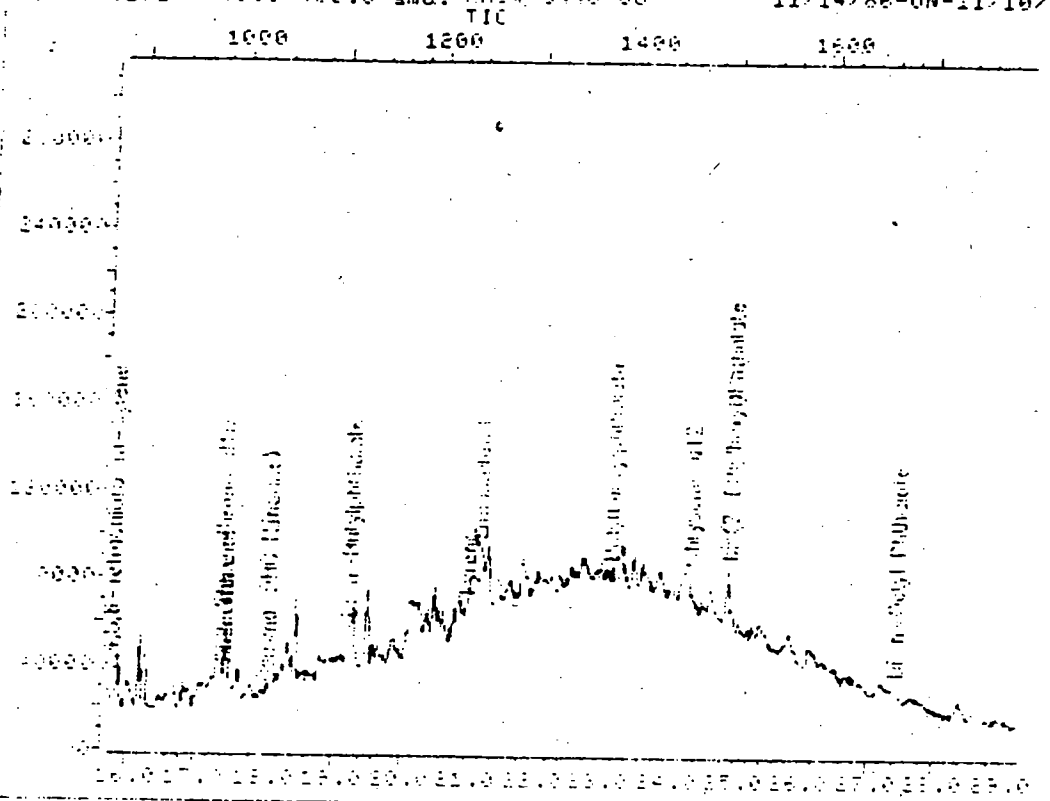
1. The first group of people who are interested in the results of the study are the researchers themselves. They want to know if the study was successful in achieving its goals and if the data collected is reliable and valid. They also want to know if the study has contributed to the field of research and if it has provided any new insights or findings.

Time (min)	Control (%)	100 μ M DMSO (%)	100 μ M DMSO + 100 μ M DMSO (%)
0	0	0	0
10	15	85	85
20	30	80	80
30	45	80	80
40	60	80	80
50	70	80	80
60	75	80	80
70	80	80	80
80	82	80	80
90	83	80	80
100	84	80	80
110	85	80	80
120	85	80	80

ORIGINAL
(Red)

TOTAL ION CHROMATOGRAM

File #8271 49.0-450.0 amu. RMC# 3448-86 11/14/88-ON-11/10/88



Core File: 8271:03

Re: RMC# 3448-86

Date: 11/14/88-ON-11/10/88

STL817

1. File: 8271:03

Title: 4010-8486 (NEUTRAL-RESISTANCE)

Last Calibration: 861001 17:35

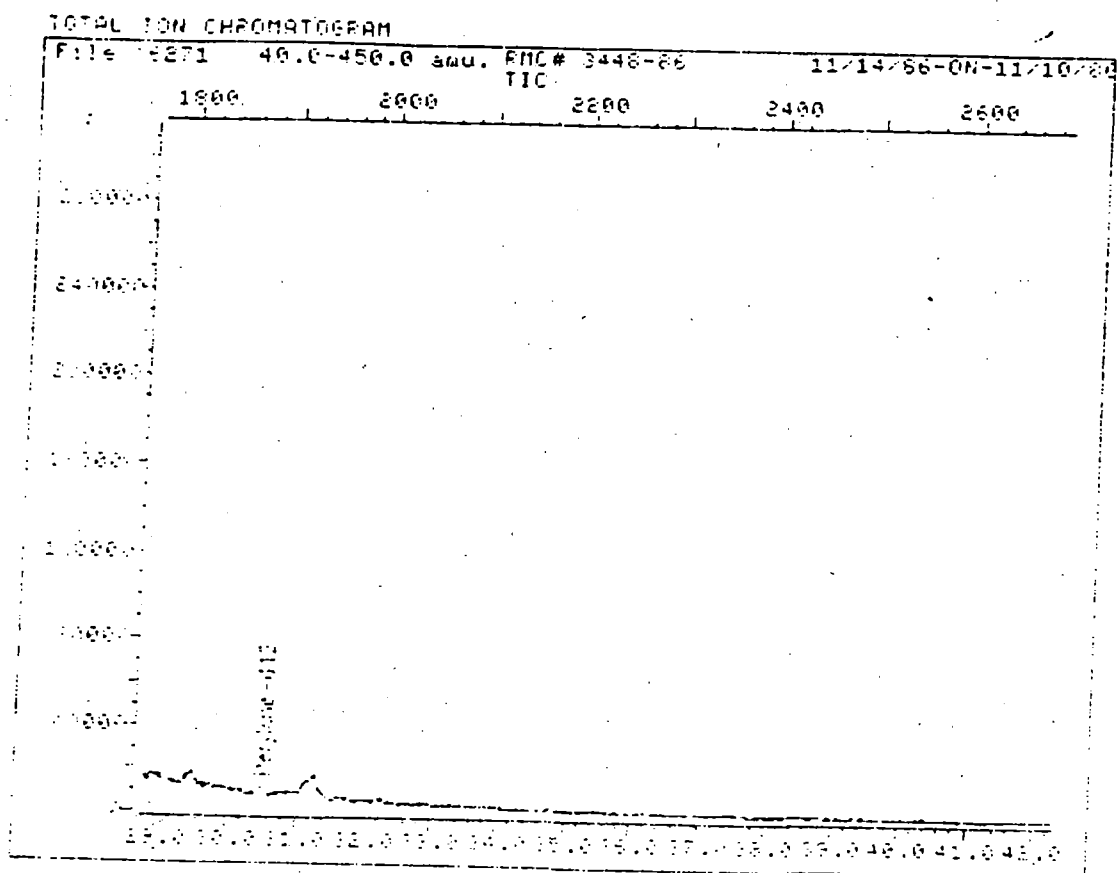
Operator: ID: JOHN

Quest: 7101 861001 18:13

Injected At: 861118 09:11

7. 11/14/88

ORIGINAL
(Red)



Data File: 8271:101
Name: FNC# 3448-86
Date: 11/14/86 ON-11/16/86

STL#17

File: 8271:101
Title: ACID-BASE NEUTRAL-PESTICIDE
Last Calibration: 861201 17:35

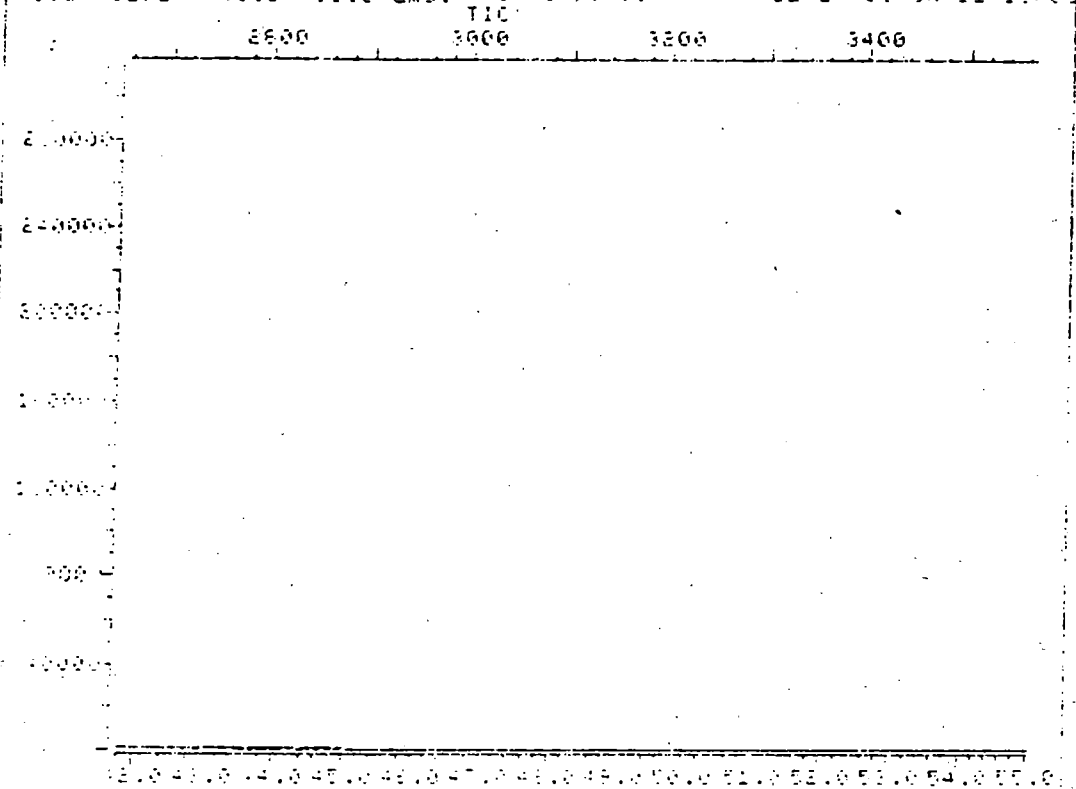
Operator ID: JOHN
Start Time: 861201 18:17
Injected at: 861215 09:10

TIC exp. 1.0 min

ORIGINAL
(Red)

TOTAL ION CHROMATOGRAM

File: 2371 40.0-450.0 amu. PNC# 3446-86 11/14/86-ON-11/10/83



Lab: File: 2371:17

Ref: PNC# 3446-86

Date: 11-14-86-11-10-83

27L817

Lab: File: 2371:17

Title: 4011-8446 DELTAMETHYLATION

Lab: Calibration: 261261 17:35

Operator: JG: JG:JG

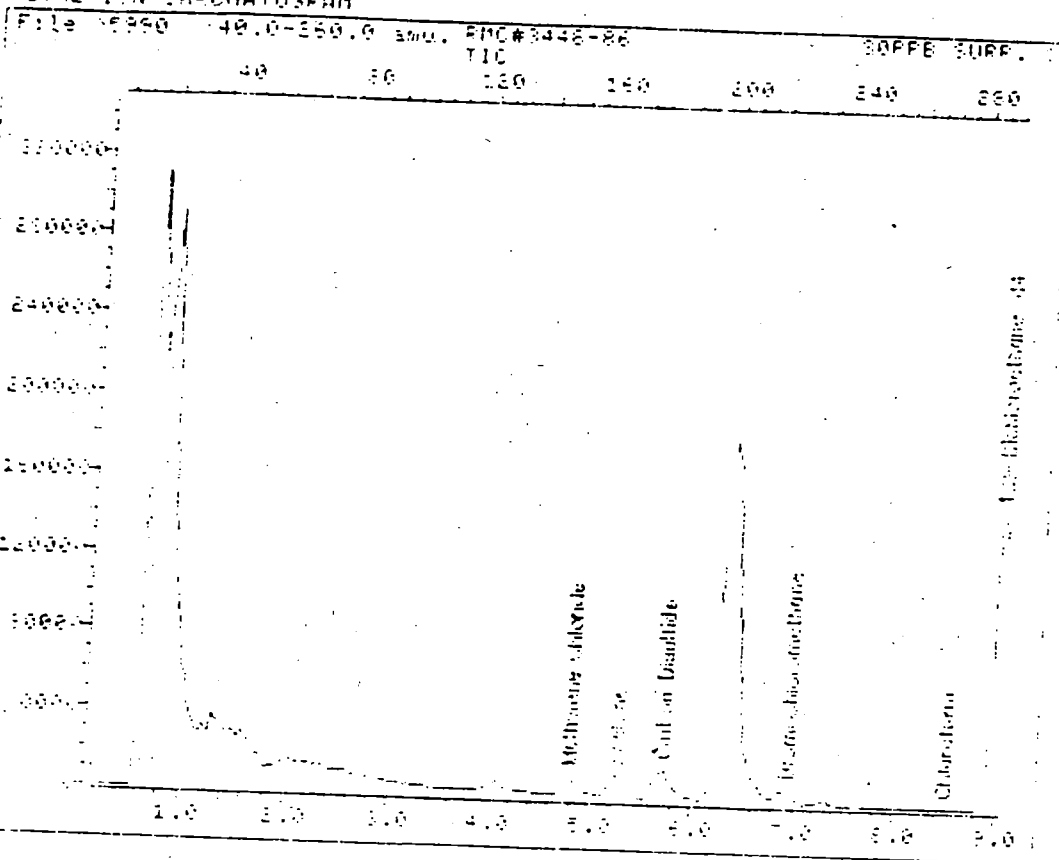
Start Time: 261111 16:17

Injected at: 261115 4:15

Page 1 of 1

ORIGINAL
(Red)

TOTAL ION CHROMATOGRAM



Data File: 5990:01
Name: FID#3448-86
Title: 30PPB SURF. 2 1/2

Is File: 00101:01
Title: GL-TILE PHARMACEUTICAL SUBSTANCES
Last Calibration: 8-11-86 12:01

Detector ID: 30PPB
Cuv. Time: 8-11-86 12:01
Injected at: 8-11-86 12:01

File: 5990:01

CERTIFICATE OF ANALYSIS

Summary of Organic Priority Pollutant Analysis

ORIGINAL
(Red)

CLIENT	Stearns Catalytic	DATE RECEIVED	10/23/86
CLIENT I.D.	13324	DATE ANALYZED	10/29/86
RMC I.D.	3448-86	ANALYZED BY	TED

VOLATILES

	<u>µg/l</u>		<u>µg/l</u>
chloromethane	<u><10 ND</u>	bromodichloromethane	<u><5 ND</u>
bromomethane	<u><10 ND</u>	1,2-dichloropropane	<u><5 ND</u>
vinyl chloride	<u><10 ND</u>	trans-1,3-dichloropropene	<u><5 ND</u>
chloroethane	<u><10 ND</u>	trichloroethene	<u>34.2</u>
methylene chloride	<u>325</u>	benzene	<u>37.6</u>
acetone	<u>1240</u>	dibromochloromethane	<u><5 ND</u>
carbon disulfide	<u><5</u>	1,1,2-trichloroethane	<u>13.0</u>
1,1-dichloroethene	<u><5 ND</u>	2-chloroethylvinyl ether	<u><10 ND</u>
1,1-dichloroethane	<u><5 ND</u>	bromoform	<u><5 ND</u>
trans-1,2-dichloroethene	<u><5 ND</u>	tetrachloroethene	<u>49.3</u>
chloroform	<u>5.2</u>	1,1,2,2-tetrachloroethane	<u>18.3</u>
1,2-dichloroethane	<u>2550</u>	toluene	<u>879</u>
1,1,1-trichloroethane	<u>80.5</u>	chlorobenzene	<u>26.2</u>
carbon tetrachloride	<u>17.1</u>	ethylbenzene	<u>91.1</u>
trichlorofluoromethane	<u><5 ND</u>	cis-1,3-dichloropropene	<u><5 ND</u>
2-butanone	<u>1790</u>	4-methyl-2-pentanone	<u>708</u>
vinyl acetate	<u>13.6</u>	2-hexanone	<u><10</u>
styrene	<u><5 ND</u>	Total Xylene	<u><10 ND</u>

SURROGATE RECOVERY:

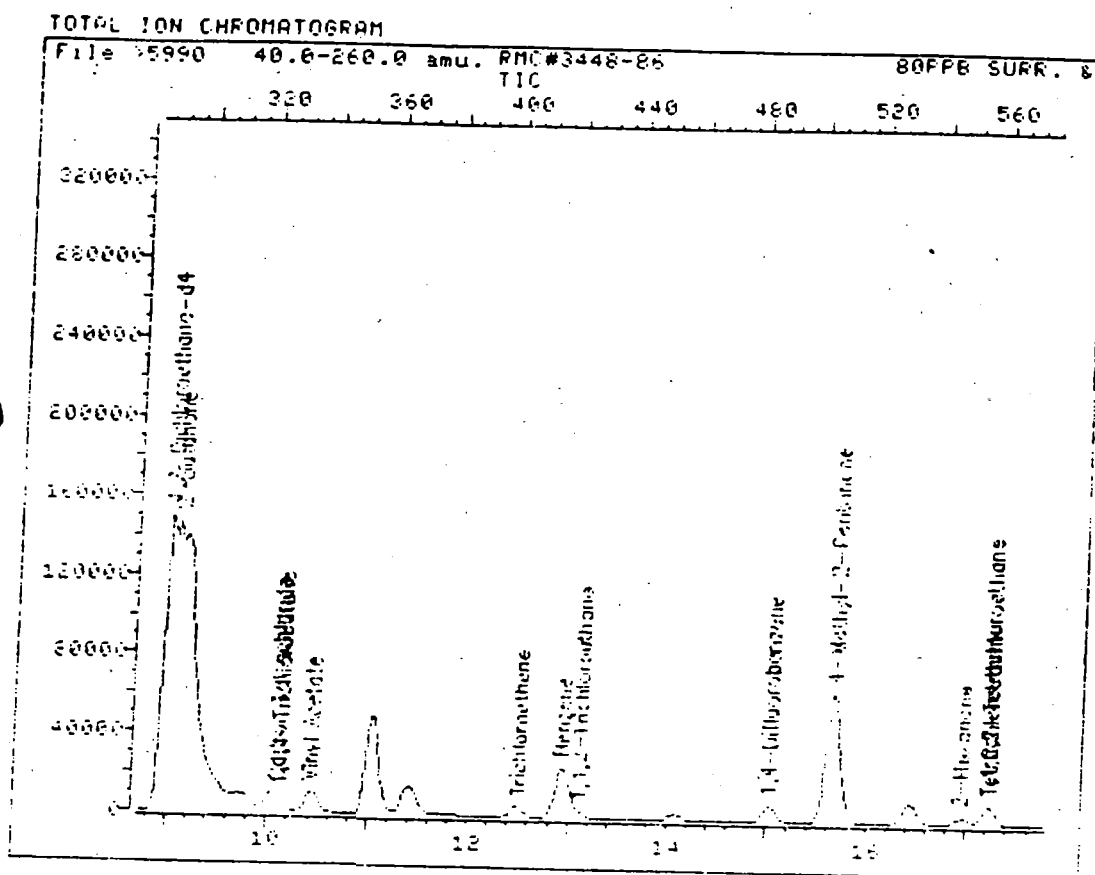
1,2-dichloroethane-d ₄	--143%
Toluene-d ₈	--96%

<x ND = Not detected, value indicates minimum quantifiable limit.

<x = Detected but at a concentration less than the minimum quantifiable limit indicated.

Approved by: _____

ORIGINAL
(Red)



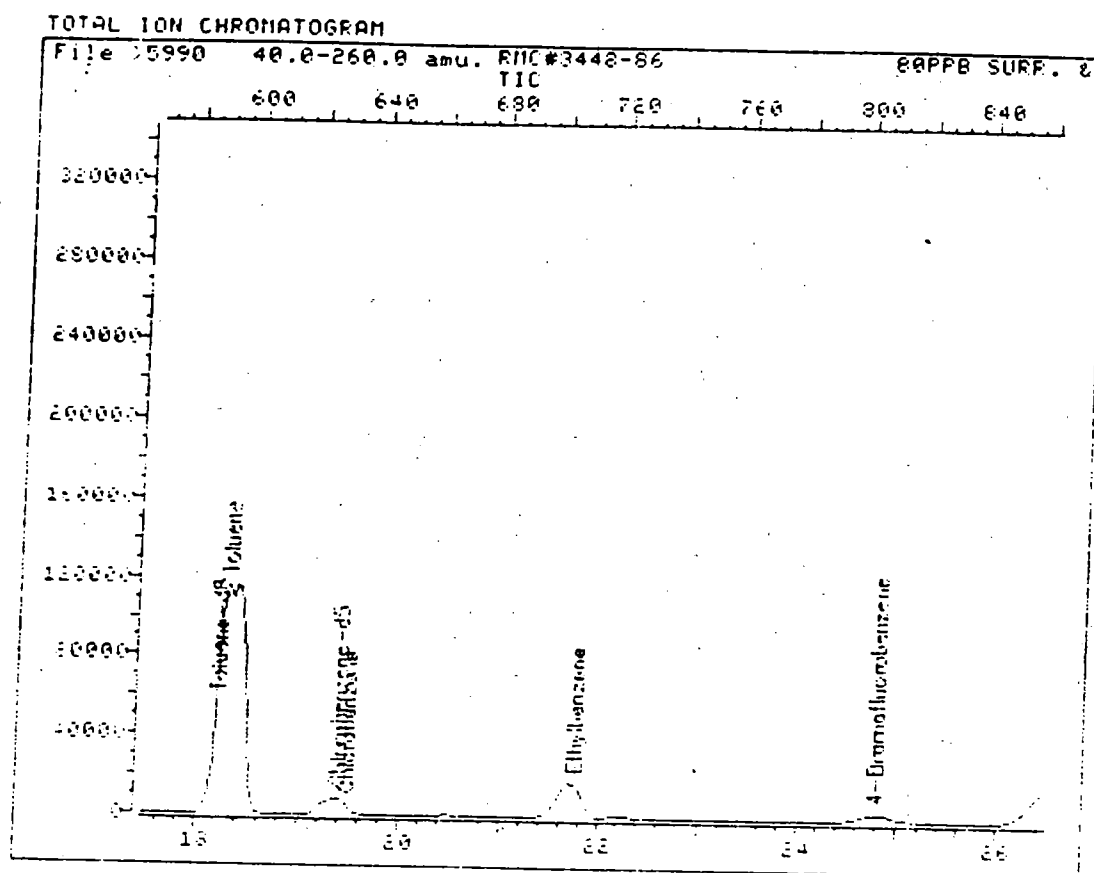
Data File: 5990:101
Name: RMC#3448-86
80PPB SURR. 2 1.3.

File: UOAI01:101
Title: VOLATILE HAZARDOUS SUBSTANCES
Last Calibration: 861104 12:01

Operator ID: JOHN
Scan Time: 861104 12:13
Injected at: 861029 14:26

Page 1 of 2

ORIGINAL
(Red)



Data File: 5990::01
Name: RUC#3442-86
Title: 80PPB SURR. 2 I.S.

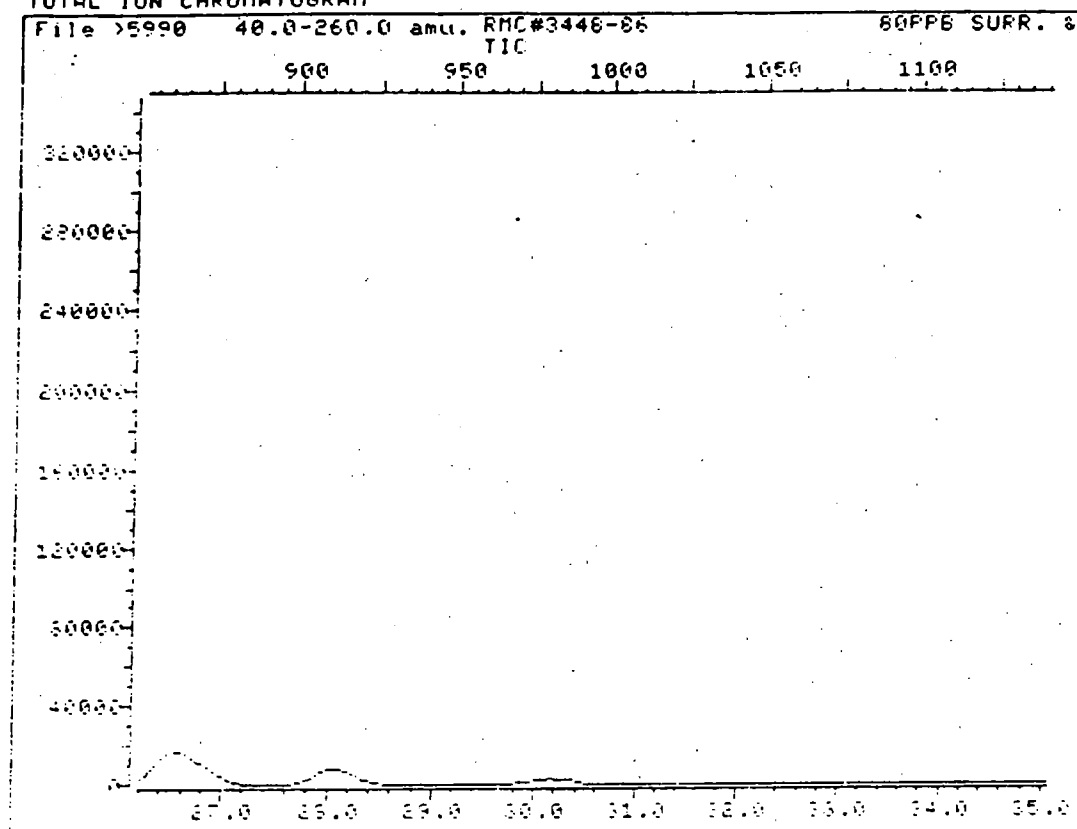
Is File: VOA101::L1
Title: VOLATILE HAZARDOUS SUBSTANCES
Last Calibration: 86110- 12:01

Operator ID: JOHN
Quant Time: 861104 12:13
Injected at: 861029 14:20

TIC page 3 of 4

ORIGINAL
(Red)

TOTAL ION CHROMATOGRAM



Data File: 5990::D1
Name: RMC#3446-86
Unit: 80FPB SURR. 2 I.S.

Id File: UOAI01::L1
Title: VOLATILE HAZARDOUS SUBSTANCES
Last Calibration: 861104 12:01

Operator ID: JOHN
Queue Time: 861104 12:13
Injected at: 861028 14:20

TIC page 1 of 1

ORIGINAL
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CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

1/21/85

Attn: Mr Kenneth L Vogt, Jr, PE

Subject: Industrial Wastewater Permit #01-01-0644-02-02
Re: November 1984 USEPA Quarterly Priority Pollutant Report

Dear Ken:

Attached you will find subject report, which was recieved 1/19/85. The delay was due to BCM's inability to submit the results sooner as required by the permit. The sample was submitted to BCM at the same time as the monthly sample the results of which you already have in your possession.

Please let me know if you have any questions on this.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer

ORIGINAL
(Red)

COMPUCHEM LABORATORIES

January 9, 1985

Ms. Sharon Nordstrom
Betz/Converse/Murdoch
One Plymouth Meeting Mall
Plymouth Meeting, PA 19462

Dear Ms. Nordstrom:

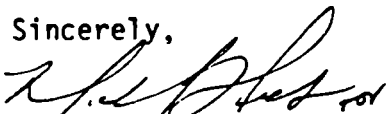
Thank you for selecting CompuChem® Laboratories for your recent sample analysis. We have completed the analysis that you requested and have enclosed a summary of the CompuChem® data for your review. Additional data details are available for purchase if you require them.

As you know, EPA has proposed detection limits for the priority pollutants in the December 3, 1979, Federal Register, and we have reported all priority pollutant concentrations which have exceeded these limits. In addition, we have permanently stored a complete record of your data on magnetic tape. This includes chromatograms, mass spectra, calibration and quality control data for the organics. Therefore, your original data is readily available for future reference. Should you require additional information from your data base, please contact us at 1/800-334-8525.

In order to expedite data to you, we have forwarded the results for all completed analyses. If you submitted more samples than are included in the enclosed results, the data will be forthcoming upon completion of our final review.

Your confidence in our CompuChem® service is appreciated. We look forward to a continuing association.

Sincerely,



Pamela S. Carrington
Manager, Report Preparation

Enclosure:

Report: 20839 - 39091

COMPUCHEM
LABORATORIES

ORIGINAL
(Red)

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1. REPORT(S) OF SAMPLE DATA

COMPUCHEM SAMPLE NO. 39091

<u>EXHIBITS</u>	(Exhibits are included for each sample above if they pertain to that sample)	
I	LABORATORY CHRONICLE	
II	COMPOUND LISTS	
III	VOLATILE	RIC
III-1	VOLATILE	SPECTRA (ABOVE DETECTION LIMITS)
III-2	VOLATILE	STANDARD RIC
IV	ACID	RIC
IV-1	ACID	SPECTRA (ABOVE DETECTION LIMITS)
IV-2	ACID	STANDARD RIC
V	BASE-NEUTRAL/PESTICIDE	RIC
V-1	BASE-NEUTRAL/PESTICIDE	SPECTRA (ABOVE DETECTION LIMITS)
V-2	BASE-NEUTRAL/PESTICIDE	STANDARD RIC
*VI	GC PESTICIDE CHROMATOGRAM (METHOD 608)	
*VI-1	PESTICIDE	RIC
*VI-2	PESTICIDE	SPECTRA (ABOVE DETECTION LIMITS)
*VI-3	PESTICIDE	STANDARD CHROMATOGRAMS
*VII	TCDD	CHROMATOGRAMS
*VIII	20 PEAK SPECTRAL MATCH DIAGRAM(s)	
*IX	CHAIN-OF-CUSTODY	

* if ordered

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2. ANALYTICAL METHODS, DEFINITIONS AND EXPLANATIONS

3. REPORT OF QUALITY CONTROL DATA *

- A. MATRIX SPIKE ANALYSIS
- B. DUPLICATE ANALYSIS
- C. METHOD BLANK ANALYSIS
- D. SURROGATE SPIKE RECOVERIES

EXHIBITS

I	VOA	BLANK RIC**
II	VOA	BFB TUNING
III	ACID	BLANK RIC**
IV	ACID	DFTPP TUNING
V	B/N/P	BLANK RIC**
VI	B/N/P	DFTPP TUNING
VII	PESTICIDE	BLANK (Method 608)

* if ordered

** Spectra and Spectral Match Diagrams included only if compounds in blank are above EPA specified detection limits.

DATA REPORT NOTICE

CompuChem employs Methods 624 and 625 for GC/MS analysis of organics in liquid matrices. These methods were proposed on December 3, 1979 by the U.S.E.P.A. in Volume 44 of the Federal Register. These methods were subsequently revised and reissued in July, 1982 as publication EPA-600/4-82-057. The EPA Environmental Monitoring and Support Laboratory (EMSL-Cincinnati) has subsequently issued method modifications which provide for the analysis of solid matrices. These modifications specify changes in the sample preparation procedures.

Additionally, for solid samples detection limits and any analytical results reported are based on processing the method specified sample size of as-received material.

The referenced methods are no longer appropriate for several of the original priority pollutant compounds. This is due to either the deletion from the toxic pollutant list (40 CFR Part 401) by EPA or the determination by EPA that the referenced methods may not be optimized for certain compounds (EPA-600/4-82-057) originally incorporated by the methods.

CompuChem® presents these compounds in its sample data report for completeness as many of the government compound list forms continue to display the affected compounds. For consistency, these compounds are reported as "BDL" or "Below Detection Limit" as they are either not likely to exist in the sample or are not likely to be detected by the method. Those compounds which have actually been deleted are listed below with the Federal Register deletion reference.

<u>Compound Name</u>	<u>GC/MS Fraction</u>	<u>Federal Register</u>	<u>Date</u>
Dichlorodifluoromethane	Volatile	46FR2264	1/8/81
*Trichlorofluoromethane	Volatile	46FR2264	1/8/81
Bis(Chloromethyl)Ether	Volatile	46FR10723	2/4/81

*While this compound has been deleted, CompuChem® continues to identify and quantitate for it.



ORIGINAL
(Red)

REPORT OF DATA

SAMPLE IDENTIFIER: 20839

COMPUCHEM SAMPLE NUMBER: 39091

SUBMITTED TO:

Ms. Sharon Nordstrom
Betz/Converse/Murdoch
One Plymouth Meeting Mall
Plymouth Meeting, PA 19462


DIANA A. SCAMMELL
TECHNICAL SPECIALIST, OPERATIONS

R. L. MYERS, PH.D., PRESIDENT

ROBERT E. MEIERER
DIRECTOR OF QUALITY ASSURANCE

ORIGINAL
(Red)

EXHIBIT I. LABORATORY CHRONICLE

SAMPLE IDENTIFIER: 20839
COMPUCHEM SAMPLE NUMBER: 39091

	<u>Date</u>
Received/Refrigerated	12/12/84
Organics	
Extracted	12/12/84
Analyzed	
1. Volatiles	12/14/84
2. Acids	12/23/84
3. Base/Neutrals	12/23/84
4. Pesticides/PCBS	12/23/84
Inorganics	
1. Metals	Not Requested
2. Cyanide	Not Requested
3. Phenol	Not Requested

ORIGINAL
(Red)

EXHIBIT II - COMPOUND LIST

SAMPLE IDENTIFIER: 20839
COMPUCHEM SAMPLE NUMBER: 39091

VOLATILE ORGANICS		CONCENTRATION (UG/L)	DETECTION* LIMIT (UG/L)	SCAN NUMBER
1V.	CHLOROMETHANE	BDL	500	
2V.	VINYL CHLORIDE	BDL	500	
3V.	CHLOROETHANE	BDL	500	
4V.	BROMOMETHANE	BDL	500	
5V.	ACROLEIN	BDL	5000	
6V.	ACRYLONITRILE	BDL	5000	
7V.	METHYLENE CHLORIDE	1400	500	198
8V.	TRICHLOROFLUOROMETHANE	BDL	500	
9V.	1,1-DICHLOROETHYLENE	BDL	500	
10V.	1,1-DICHLOROETHANE	BDL	500	
11V.	TRANS-1,2-DICHLOROETHYLENE	BDL	500	
12V.	CHLOROFORM	BDL	500	
13V.	1,2-DICHLOROETHANE	840	500	379
14V.	1,1,1-TRICHLOROETHANE	BDL	500	
15V.	CARBON TETRACHLORIDE	BDL	500	
16V.	BROMODICHLOROMETHANE	BDL	500	
17V.	1,2-DICHLOROPROPANE	BDL	500	
18V.	TRANS-1,3-DICHLOROPROPENE	BDL	500	
19V.	TRICHLOROETHYLENE	BDL	500	
20V.	BENZENE	BDL	500	
21V.	CIS-1,3-DICHLOROPROPENE	BDL	500	
22V.	1,1,2-TRICHLOROETHANE	BDL	500	
23V.	DIBROMOCHLOROMETHANE	BDL	500	
24V.	BROMOFORM	BDL	500	
25V.	1,1,2,2-TETRACHLOROETHYLENE	BDL	500	
26V.	1,1,2,2-TETRACHLOROETHANE	BDL	500	
27V.	TOLUENE	5900	500	726
28V.	CHLOROBENZENE	BDL	500	
29V.	ETHYLBENZENE	BDL	500	
30V.	2-CHLOROETHYL VINYL ETHER	BDL	500	
31V.	DICHLORODIFLUOROMETHANE [†]	BDL		
32V.	BIS(CHLOROMETHYL)ETHER [†]	BDL		

BDL=BELOW DETECTION LIMIT

[†]See Data Report Notice

*Sample analyzed using a 50:1 dilution. thus the higher than normal detection limits.

ORIGINAL
(Red)

EXHIBIT II - COMPOUND LIST

SAMPLE IDENTIFIER: 20839
COMPUCHEM SAMPLE NUMBER: 39091

ACID EXTRACTABLE ORGANICS	CONCENTRATION (UG/L)	DETECTION*	
		LIMIT (UG/L)	SCAN NUMBER
1A. PHENOL	1600 ⁽¹⁾	250	427
2A. 2-CHLOROPHENOL	BDL	250	
3A. 2-NITROPHENOL	480	250	550
4A. 2,4-DIMETHYLPHENOL	BDL	250	
5A. 2,4-DICHLOROPHENOL	BDL	250	
6A. P-CHLORO-M-CRESOL	BDL	250	
7A. 2,4,6-TRICHLOROPHENOL	BDL	250	
8A. 2,4-DINITROPHENOL	BDL	2500	
9A. 4-NITROPHENOL	310	250	777
10A. 4,6-DINITRO-O-CRESOL	BDL	2500	
11A. PENTACHLOROPHENOL	BDL	250	

BDL=BELOW DETECTION LIMIT

*Sample analyzed using a 10:1 dilution, thus the higher than normal detection limits.

(1) Quantitated using secondary ion

ORIGINAL
(Red)

EXHIBIT II - COMPOUND LIST

SAMPLE IDENTIFIER: 20839
COMPUCHEM SAMPLE NUMBER: 39091

BASE-NEUTRAL EXTRACTABLE ORGANICS	CONCENTRATION (UG/L)	DETECTION* LIMIT (UG/L)	SCAN NUMBER
1B. N-NITROSODIMETHYLAMINE	BDL	200	
2B. BIS (2-CHLOROETHYL) ETHER	BDL	200	
3B. 1,3-DICHLOROBENZENE	BDL	200	
4B. 1,4-DICHLOROBENZENE	BDL	200	
5B. 1,2-DICHLOROBENZENE	BDL	200	
6B. BIS (2-CHLOROISOPROPYL) ETHER	BDL	200	
7B. HEXACHLOROETHANE	BDL	200	
8B. N-NITROSODI-N-PROPYLAMINE	BDL	200	
9B. NITROBENZENE	BDL	200	
10B. ISOPHORONE	170	200	853
11B. BIS(2-CHLOROETHOXY) METHANE	BDL	200	
12B. 1,2,4-TRICHLOROBENZENE	BDL	200	
13B. NAPHTHALENE	BDL	200	
14B. HEXACHLOROBUTADIENE	BDL	200	
15B. HEXACHLOROCYCLOPENTADIENE	BDL	200	
16B. 2-CHLORONAPHTHALENE	BDL	200	
17B. DIMETHYLPHTHALATE	BDL	200	
18B. ACENAPHTHYLENE	BDL	200	
19B. 2,6-DINITROTOLUENE	BDL	200	
20B. ACENAPHTHENE	BDL	200	
21B. 2,4-DINITROTOLUENE	BDL	200	
22B. DIETHYLPHTHALATE	BDL	200	
23B. FLUORENE	BDL	200	
24B. 4-CHLOROPHENYL PHENYL ETHER	BDL	200	
25B. DIPHENYLAMINE (N-NITROSO)	BDL	200	
26B. 1,2-DIPHENYLHYDRAZINE (AZOBENZENE)	BDL	200	
27B. 4-BROMOPHENYL PHENYL ETHER	BDL	200	
28B. HEXACHLOROBENZENE	BDL	200	

(Continued)

BDL=BELOW DETECTION LIMIT

*Sample analyzed using a 20:1 dilution because of the presence of large amounts of non-priority pollutant material, thus the higher than normal detection limits.

ORIGINAL
(Red)

EXHIBIT II - COMPOUND LIST

SAMPLE IDENTIFIER: 20839
COMPUCHEM SAMPLE NUMBER: 39091

BASE-NEUTRAL
EXTRACTABLE ORGANICS (continued)

	CONCENTRATION (UG/L)	DETECTION* LIMIT (UG/L)	SCAN NUMBER
29B. PHENANTHRENE	BDL	200	
30B. ANTHRACENE	BDL	200	
31B. DI-N-BUTYLPHTHALATE	BDL	200	
32B. FLUORANTHENE	BDL	200	
33B. BENZIDINE	BDL	200	
34B. PYRENE	BDL	200	
35B. BUTYLBENZYLPHTHALATE	BDL	200	
36B. BENZO(A)ANTHRACENE	BDL	200	
37B. 3,3'-DICHLOROBENZIDINE	BDL	200	
38B. CHRYSENE	BDL	200	
39B. BIS(2-ETHYLHEXYL)PHTHALATE	380	200	1616
40B. DI-N-OCTYLPHTHALATE	460	200	1754
41B. BENZO(B)FLUORANTHENE	BDL	200	
42B. BENZO(K)FLUORANTHENE	BDL	200	
43B. BENZO(A)PYRENE	BDL	200	
44B. INDENO(1,2,3-C,D)PYRENE	BDL	500	
45B. DIBENZO(A,H)ANTHRACENE	BDL	500	
46B. BENZO(G,H,I)PERYLENE	BDL	500	

BDL=BELOW DETECTION LIMIT

*Sample analyzed using a 20:1 dilution because of the presence of large amounts of non-priority pollutant material, thus the higher than normal detection limits.

ORIGINAL
(Red)

EXHIBIT II - COMPOUND LIST

SAMPLE IDENTIFIER: 20839
COMPUCHEM SAMPLE NUMBER: 39091

PESTICIDES/PCB'S	CONCENTRATION (UG/L)	DETECTION* LIMIT (UG/L)
1P. ALDRIN	BDL	200
2P. ALPHA-BHC	BDL	200
3P. BETA-BHC	BDL	200
4P. GAMMA-BHC	BDL	200
5P. DELTA-BHC	BDL	200
6P. CHLORDANE	BDL	200
7P. 4,4'-DDT	BDL	200
8P. 4,4'-DDE	BDL	200
9P. 4,4'-DDD	BDL	200
10P. DIELDRIN	BDL	200
11P. ENDOSULFAN I	BDL	200
12P. ENDOSULFAN II	BDL	200
13P. ENDOSULFAN SULFATE	BDL	200
14P. ENDRIN	BDL	200
15P. ENDRIN ALDEHYDE	BDL	200
16P. HEPTACHLOR	BDL	200
17P. HEPTACHLOR EPOXIDE	BDL	200
18P. PCB-1242	BDL	200
19P. PCB-1254	BDL	200
20P. PCB-1221	BDL	200
21P. PCB-1232	BDL	200
22P. PCB-1248	BDL	200
23P. PCB-1260	BDL	200
24P. PCB-1016	BDL	200
25P. TOXAPHENE	BDL	200

BDL=BELOW DETECTION LIMIT

*Sample analyzed using a 20:1 dilution because of the presence of large amounts of non-priority pollutant material, thus the higher than normal detection limits.



CHEM TEK SERVICES

PO BOX 1424 MALVERN. PA 19355 (215)436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

2/21/87

Attn: Mr Mark S Cleveland, Pretreatment Program Supervisor

Subject: Self-Monitoring Reports
Re: June 1987

Dear Mark:

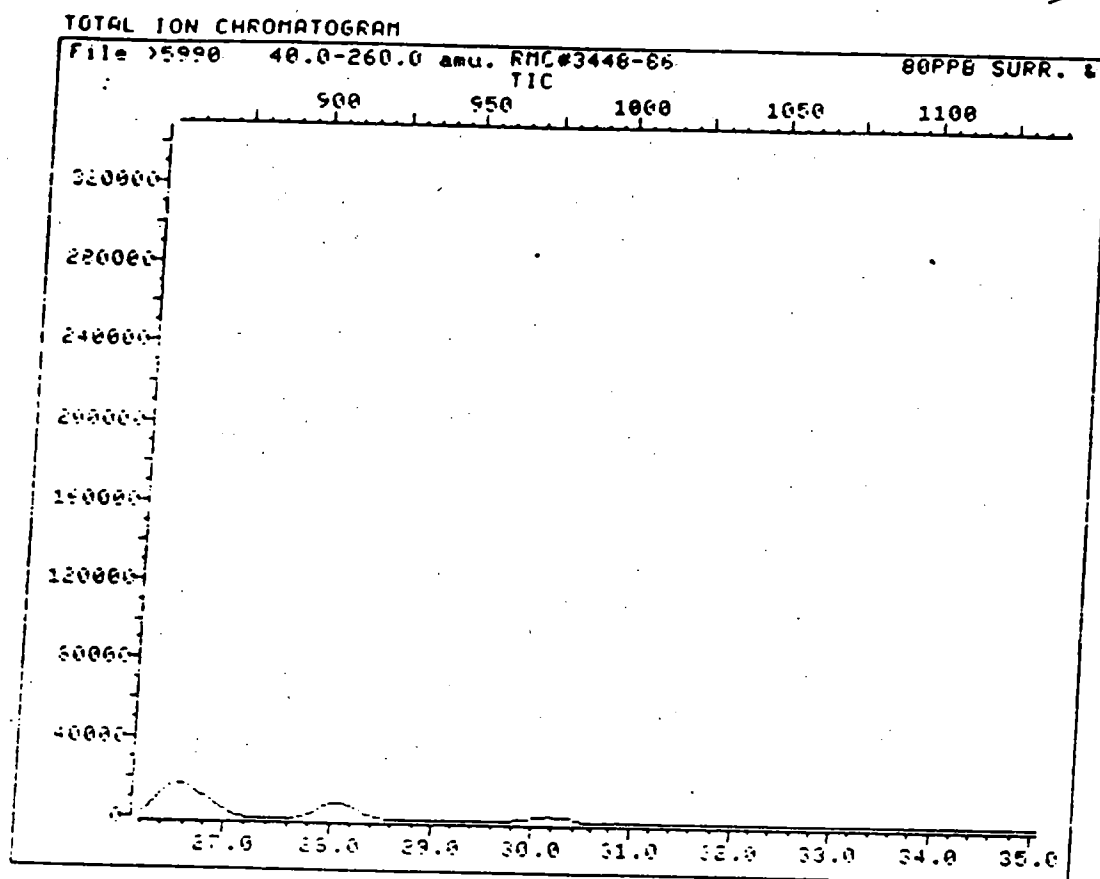
Enclosed please find subject report and plant log sheets as required by the current permit.

Please let me know if you have any questions on the enclosed.

Very truly yours,

Gardner K Flynn, JR
Operations/Engineering
Consultant

ORIGINAL
(Red)



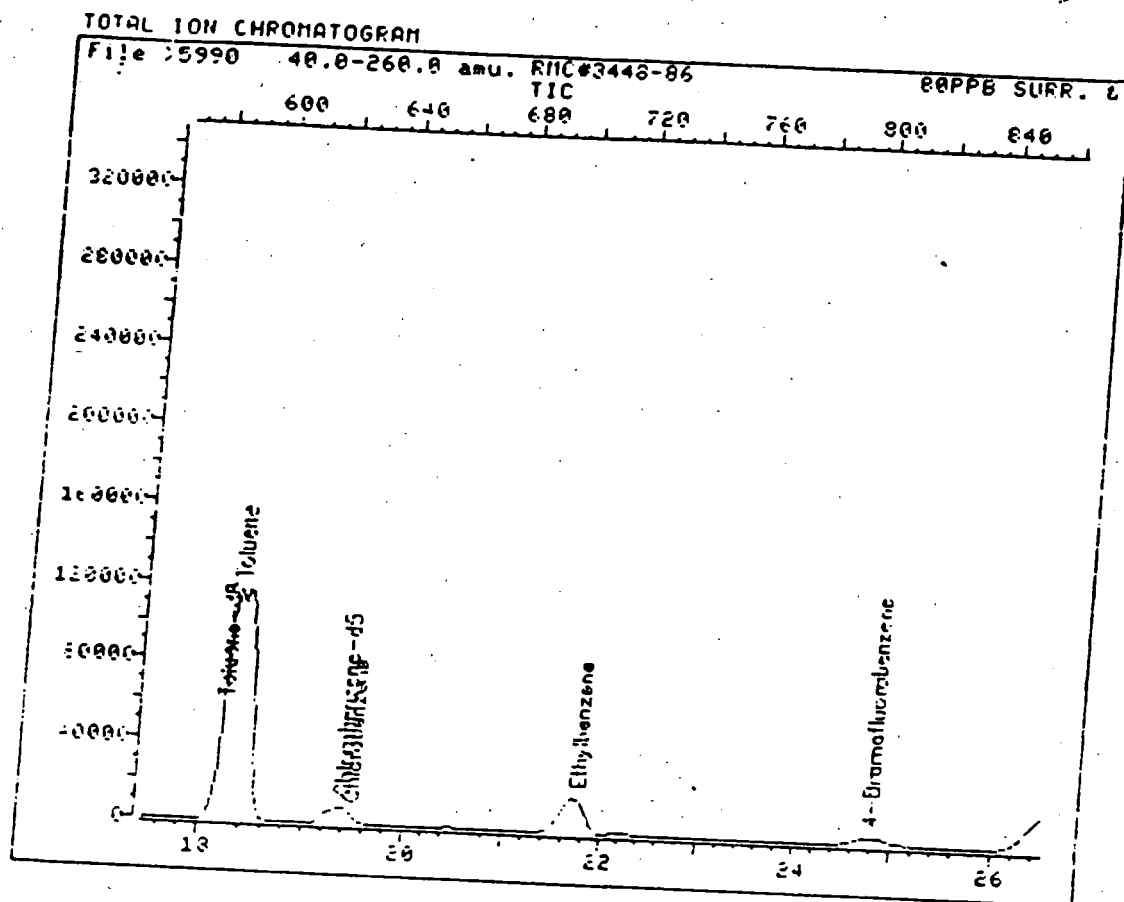
Data File: 5990::D1
Name: RMC#3448-86
Mass: 80PPB SURR. & I.S.

Id File: VOA101::L1
Title: VOLATILE HAZARDOUS SUBSTANCES
Last Calibration: 861104 12:01

Operator ID: JOHN
Queue Time: 861104 12:13
Injected at: 861029 14:26

TIC page 4 of 4

ORIGINAL
(Red)



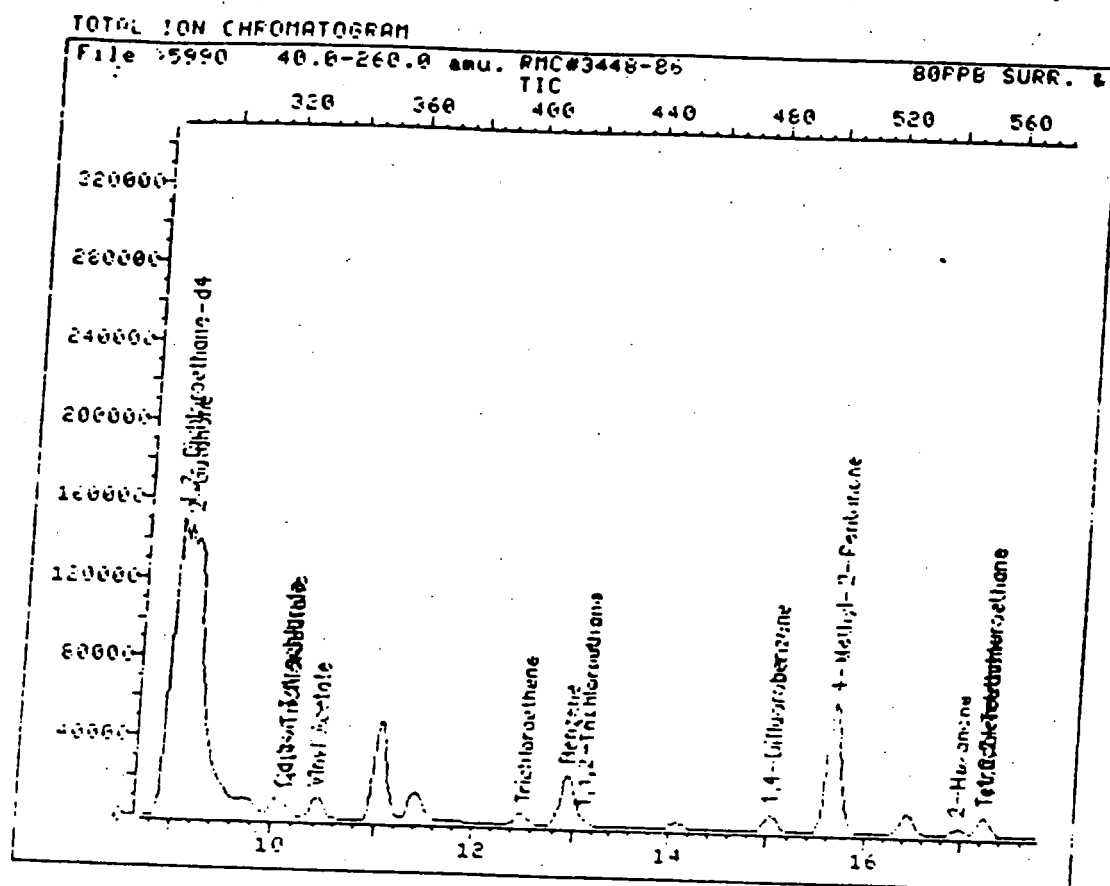
Data File: 5990::01
Name: RMC#3443-86
Misc: 80PPB SURR. 2 I.S.

Is File: UOAI01::L1
Title: VOLATILE HAZARDOUS SUBSTANCES
Last Calibration: 86110- 12:01

Operator ID: JOHN
Quant Time: 861104 12:13
Injected at: 861029 14:26

Till page 2 of 2

ORIGINAL
(Red)



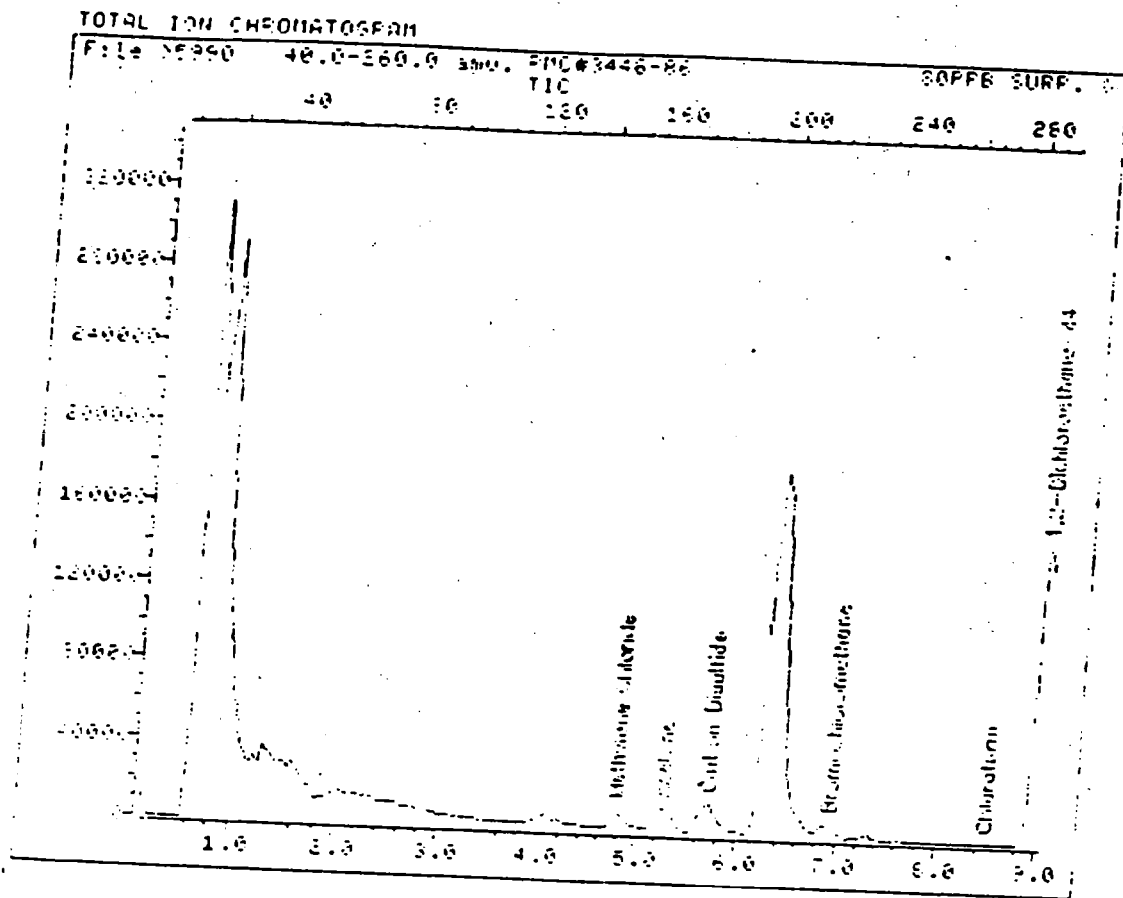
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Name: RMC#3448-86
Misc: 80FPB SURR. & I.S.

Is File: VOA101::L1
Title: VOLATILE HAZARDOUS SUBSTANCES
Last Calibration: 861104 12:01

Operator ID: JOHN
Queue Time: 861104 12:13
Injected at: 861029 14:26

TIC page 1 of 4

ORIGINAL
(Red)



Data File: 5990::01

Name: RND#3446-86

Title: 30PPB SURF. 2 1.5.

Id File: UOAI01::L1

Title: VOLATILE HAZARDOUS SUBSTANCES

Last Calibration: 86110- 12:01

Operator ID: JOHN

Start Time: 861104 12:17

Injected at: 861029 14:15

Page 1 of 1

CERTIFICATE OF ANALYSIS

ORIGINAL
(Red)

Summary of Organic Priority Pollutant Analysis

CLIENT	Stearns Catalytic	DATE RECEIVED	10/23/86
CLIENT I.D.	13324	DATE ANALYZED	10/29/86
RMC I.D.	3448-86	ANALYZED BY	TED

VOLATILES

	<u>µg/l</u>		<u>µg/l</u>
chloromethane	<u><10 ND</u>	bromodichloromethane	<u><5 ND</u>
bromomethane	<u><10 ND</u>	1,2-dichloropropane	<u><5 ND</u>
vinyl chloride	<u><10 ND</u>	trans-1,3-dichloropropene	<u><5 ND</u>
chloroethane	<u><10 ND</u>	trichloroethene	<u>34.2</u>
methylene chloride	<u>325</u>	benzene	<u>37.6</u>
acetone	<u>1240</u>	dibromochloromethane	<u><5 ND</u>
carbon disulfide	<u><5</u>	1,1,2-trichloroethane	<u>13.0</u>
1,1-dichloroethene	<u><5 ND</u>	2-chloroethylvinyl ether	<u><10 ND</u>
1,1-dichloroethane	<u><5 ND</u>	bromoform	<u><5 ND</u>
trans-1,2-dichloroethene	<u><5 ND</u>	tetrachloroethene	<u>49.3</u>
chloroform	<u>5.2</u>	1,1,2,2-tetrachloroethane	<u>18.3</u>
1,2-dichloroethane	<u>2550</u>	toluene	<u>879</u>
1,1,1 trichloroethane	<u>80.5</u>	chlorobenzene	<u>26.2</u>
carbon tetrachloride	<u>17.1</u>	ethylbenzene	<u>91.1</u>
trichlorofluoromethane	<u><5 ND</u>	cis-1,3-dichloropropene	<u><5 ND</u>
2-butanone	<u>1790</u>	4-methyl-2-pentanone	<u>708</u>
vinyl acetate	<u>13.6</u>	2-hexanone	<u><10</u>
styrene	<u><5 ND</u>	Total Xylene	<u><10 ND</u>

IRROGATE RECOVERY:

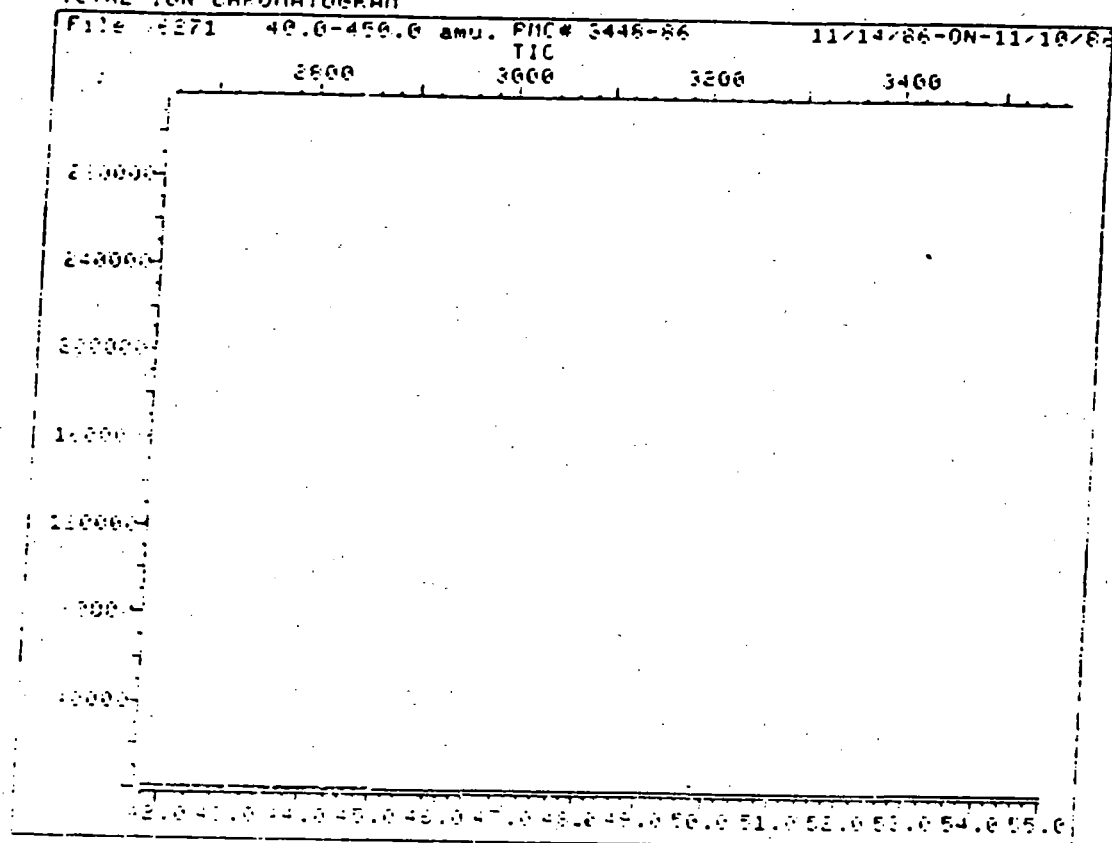
1,2-dichloroethane-d ₄	_143%
Toluene-d ₈	_96%

*x ND = Not detected, value indicates minimum quantifiable limit.
 *x = Detected but at a concentration less than the minimum quantifiable limit indicated.

Approved by: _____

ORIGINAL
(Red)

TOTAL ION CHROMATOGRAM



Data File: #271:03
Name: PNC# 3446-86
Date: 11/14/86-ON-11/10/86

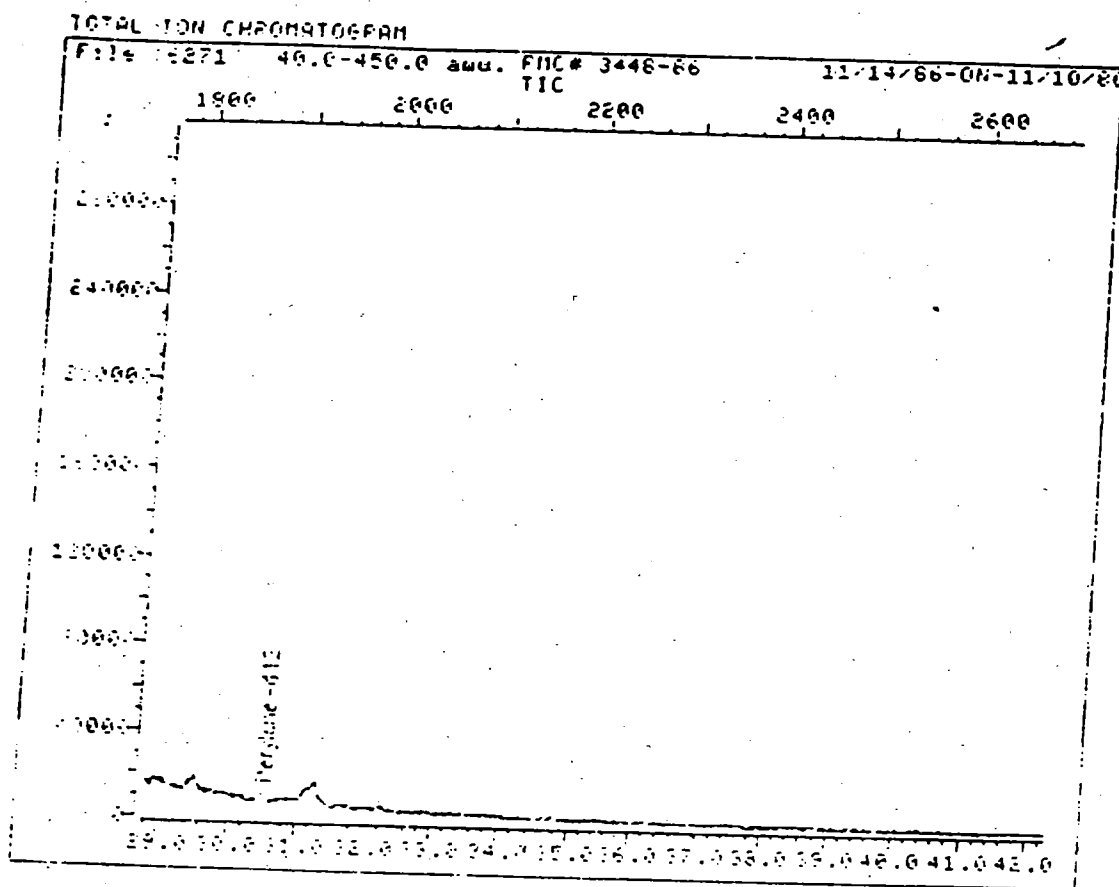
ETL#17

Is File: VALR01:03
Title: 4010-SABE-NEUTRAL-PESTICIDE
Lab: Calibration: 861201 17:35

Operator: ID: JOHN
Quant Time: 861201 18:17
Injected at: 861115 09:15

TIC Page 1 of 1

ORIGINAL
(Red)



Date Filed: 6271:03
Name: FID# 3448-86
Date: 11/14/86-ON-11/10/86

BTL#17

Id Filed: FILED:03
Title: ACID-BASE NEUTRAL-PESTICIDE
Last Calibration: 861201 17:35

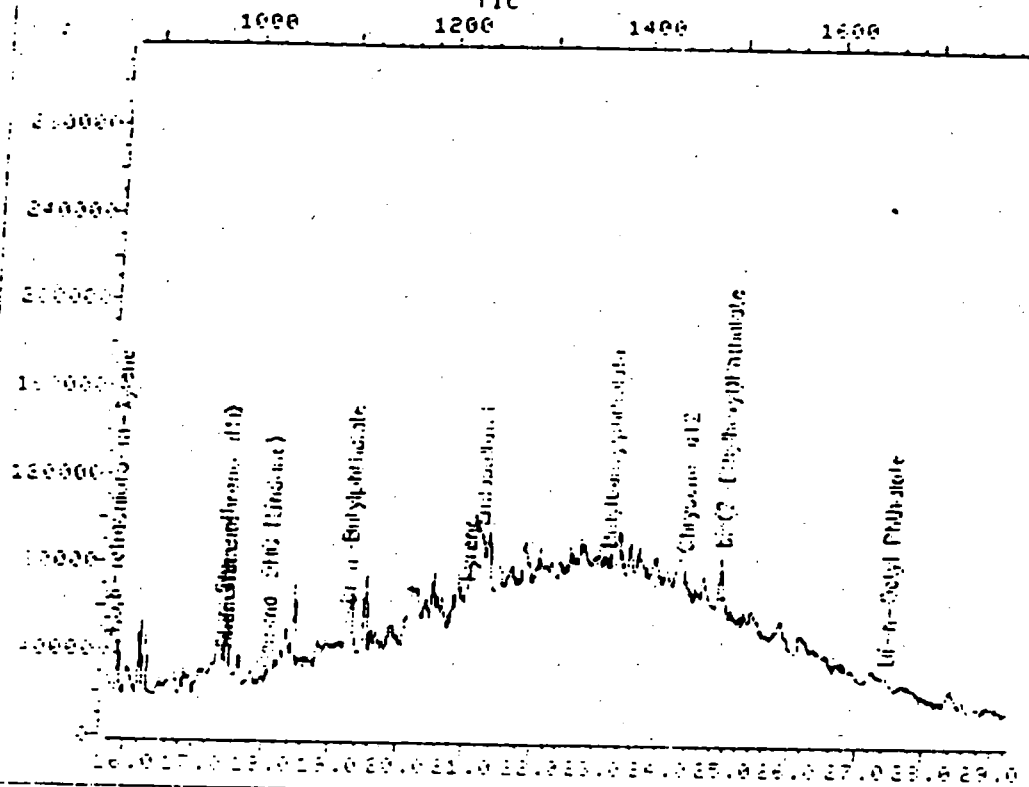
Operator ID: JOHN
Quant Time: 861201 18:17
Injected at: 861115 09:15

TIC page 1 of 1

TOTAL IN CHARGE _____

FILE# 34371 40.0-450.0 AMU. RMC# 3448-86 11/14/86-ON-11/10/86

TIC



Date Filed: 6/27/11:03
Name: RUC: 74-8-86
File: 11/14/86-04-11/10 36

Ref: EICB 7-10-85

File: 100-4036-54-1119 30

57-432

File: MYLE10:121
Title: ACID-BASE/NEUTRAL-PESTICIDES
Last Calibration: 661201 17:35

Title: ACID-BASE NEUTRALIZATION

Last Calibration: 601201 17:35

Operator ID: JOHN

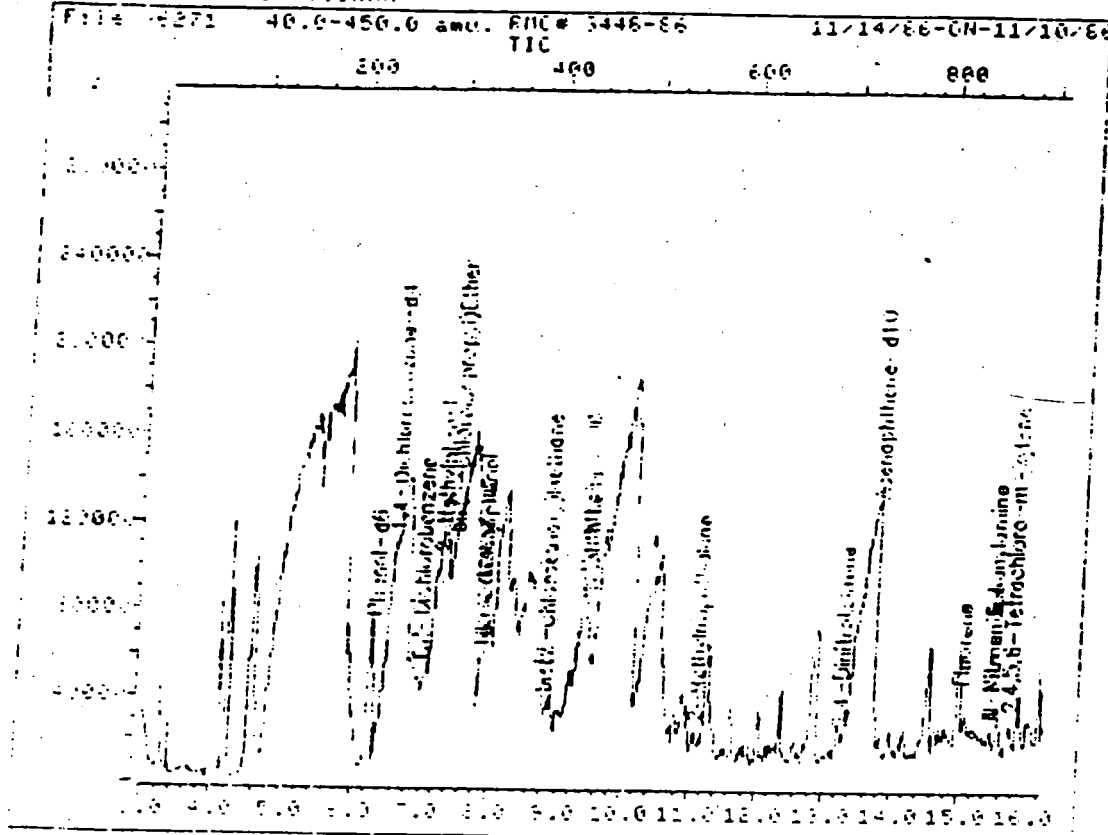
Subject: Timothy 861271 18:13

inter-ops test: 351115 09:15

Page 2 of 2

TOTAL ION CHROMATOGRAM

F11# 0271 40.0-450.0 amu. FID# 3446-86 11/14/86-GN-11/10/86
TIC



Date Filed: 6/27/11:03
Name: RUCR 34-18-80
DocId: 11414786-00-11/10/96

BTLD:17

File: C:\LEAD\LI
Title: ALIO-SAGE-NEUTRAL-PESTICIDE
Last Calculation: 6/10/11 17:35

```
Operator ID: JOHN
Conn. Time: 36100 18:13
Invoiced at: 36115 19:15
```

Page 6

CERTIFICATE OF ANALYSIS

ORIGINAL
(Red)

Summary of Organic Priority Pollutant Analysis

CLIENT	<u>Stearns Catalytic</u>	DATE RECEIVED	<u>10/23/86</u>
CLIENT I.D.	<u>13324</u>	DATE ANALYZED	<u>11/15/86</u>
RMC I.D.	<u>3448-86</u>	ANALYZED BY	<u>TED</u>

PESTICIDES

	<u>µg/l</u>		<u>µg/l</u>
a-BHC	<u><20 ND</u>	4,4'-DDD	<u><20 ND</u>
g-BHC	<u><20</u>	endrin aldehyde	<u><20 ND</u>
b-BHC	<u><20 ND</u>	endosulfan sulfate	<u><20 ND</u>
d-BHC	<u><20 ND</u>	4,4'-DDT	<u><20 ND</u>
heptachlor	<u><20 ND</u>	chlordan	<u><25 ND</u>
aldrin	<u><20 ND</u>	toxaphene	<u><25 ND</u>
heptachlor epoxide	<u><20 ND</u>	PCB - 1016	<u><10 ND</u>
endosulfan I	<u>55.9</u>	PCB - 1221	<u><10 ND</u>
4,4'-DDE	<u><20 ND</u>	PCB - 1232	<u><10 ND</u>
dieldrin	<u><20 ND</u>	PCB - 1242	<u><10 ND</u>
endrin	<u><20 ND</u>	PCB - 1248	<u><10 ND</u>
endosulfan II	<u><50 ND</u>	PCB - 1254	<u><10 ND</u>
		PCB - 1260	<u><10 ND</u>

<x ND = Not detected, value indicates minimum quantifiable limit.
 <x = Detected but at a concentration less than the minimum quantifiable limit indicated.

Approved By: Paul E. Quinn

CERTIFICATE OF ANALYSIS

ORIGINAL
(Red)

Summary of Organic Priority Pollutant Analysis

CLIENT	<u>Stearns Catalytic</u>	DATE RECEIVED	<u>10/23/86</u>
CLIENT I.D.	<u>13324</u>	DATE ANALYZED	<u>11/15/86</u>
RMC I.D.	<u>3448-86</u>	ANALYZED BY	<u>TED</u>

ACID COMPOUNDS

	<u>µg/l</u>
phenol	<u><10 ND</u>
2-chlorophenol	<u><10 ND</u>
2-nitrophenol	<u>32.2</u>
2,4-dimethylphenol	<u><10 ND</u>
2,4-dichlorophenol	<u><10 ND</u>
4-chloro-3-methylphenol	<u><10 ND</u>
2,4,6-trichlorophenol	<u><10 ND</u>
2,4-dinitrophenol	<u><50 ND</u>
4-nitrophenol	<u><50 ND</u>
2-methyl-4,6-dinitrophenol	<u><50 ND</u>
pentachlorophenol	<u><50 ND</u>

<x ND = Not detected, value indicates minimum quantifiable limit.

<x = Detected but at a concentration less than the minimum quantifiable limit indicated.

Approved By:

Timothy E. Dwyer

CERTIFICATE OF ANALYSIS

ORIGINAL

Summary of Organic Priority Pollutant Analysis

CLIENT	Stearns Catalytic	DATE RECEIVED	10-23-86
CLIENT I.D.	13324	DATE ANALYZED	11-15-86
RMC I.D.	3448-86	ANALYZED BY	TED

BASE/NEUTRAL COMPOUNDS

	<u>ug/l</u>		<u>ug/l</u>
n-nitrosodimethylamine	NA	4-chlorophenyl phenyl ether	<10 ND
bis(2-chloroethyl)ether	<10 ND	n-nitrosodiphenylamine	27.2
1,3-dichlorobenzene	<10 ND	1,2-diphenylhydrazine	<10 ND
1,4-dichlorobenzene	<10 ND	4-bromophenyl phenyl ether	<10 ND
1,2-dichlorobenzene	13.9	hexachlorobenzene	<10 ND
bis(2-chloroisopropyl)ether	154	phenanthrene	<10
hexachloroethane	<10 ND	anthracene	<10
n-nitrosodi-n-propylamine	<10 ND	di-n-butyl phthalate	13.6
nitrobenzene	<10 ND	fluoranthene	<10 ND
isophorone	112	benzidine	-
bis(2-chloroethoxy)methane	<10	pyrene	<10
1,2,4-trichlorobenzene	<10	butyl benzyl phthalate	<10
naphthalene	61.8	benz(a)anthracene	<10 ND
hexachlorobutadiene	<10 ND	chrysene	<10 ND
hexachlorocyclopentadiene	<10 ND	3,3'-dichlorobenzidine	<20 ND
2-chloronaphthalene	<10 ND	bis(2-ethylhexyl)phthalate	124
acenaphthylene	<10 ND	di-n-octyl phthalate	43.4
dimethyl phthalate	<10 ND	benzo(b)fluoranthene	<10 ND
2,6-dinitrotoluene	<10 ND	benzo(k)fluoranthene	<10 ND
acenaphthene	<10 ND	benzo(a)pyrene	<10 ND
2,4-dinitrotoluene	201	indeno(1,2,3-c,d)pyrene	<10 ND
fluorene	<10	dibenz(a,h)anthracene	<10 ND
diethyl phthalate	<10 ND	benzo(g,h,i)perylene	<10 ND
		2,3,7,8-tetrachlorodibenzo-p-dioxin	<10 ND

< x ND= Not detected, value indicates minimum quantifiable limit.

< x = Detected but at a concentration less than the minimum quantifiable limit indicated.

Approved By: John E. [Signature]

Page No. 1
12/15/86

2478

STEARNS CATALYTIC LABORATORY DATA SUMMARY

LOG NO	SAMPLE DESCRIPTION	ANALYSIS	TREATMENT	RESULT	DATE ANALYSIS STARTED	DATE ANALYSIS COMPLETED
13324	WWTP EFFLUENT	AA Ag	TOTAL	0.82 mg/l	10/27/86	10/27/86
13324	WWTP EFFLUENT	AA Al	TOTAL	3.79 mg/l	11/03/86	11/03/86
13324	WWTP EFFLUENT	AA As	TOTAL	0.082 mg/l	10/30/86	10/30/86
13324	WWTP EFFLUENT	AA Be	TOTAL	ND(0.01 mg/l)	11/04/86	11/04/86
13324	WWTP EFFLUENT	AA Cd	TOTAL	0.092 mg/l	10/27/86	10/27/86
13324	WWTP EFFLUENT	AA Cr	TOTAL	0.71 mg/l	10/27/86	10/27/86
13324	WWTP EFFLUENT	AA Cu	TOTAL	0.242 mg/l	10/28/86	10/28/86
13324	WWTP EFFLUENT	AA Fe	TOTAL	1.21 mg/l	10/29/86	10/29/86
13324	WWTP EFFLUENT	AA Hg	TOTAL	ND(0.001 mg/l)	10/23/86	10/23/86
13324	WWTP EFFLUENT	AA Ni	TOTAL	ND(0.05 mg/l)	10/29/86	10/29/86
13324	WWTP EFFLUENT	AA Pb	TOTAL	6.34 mg/l	10/27/86	10/27/86
13324	WWTP EFFLUENT	AA Sb	TOTAL	1.47 mg/l	11/04/86	11/04/86
13324	WWTP EFFLUENT	AA Se	TOTAL	ND(0.025 mg/l)	10/30/86	10/30/86
13324	WWTP EFFLUENT	AA Sn	TOTAL	ND(0.6 mg/l)	11/03/86	11/03/86
13324	WWTP EFFLUENT	AA Ti	TOTAL	ND(0.09 mg/l)	11/04/86	11/04/86
13324	WWTP EFFLUENT	AA Zn	TOTAL	33.7 mg/l	10/28/86	10/28/86
13324	WWTP EFFLUENT	CN		0.453 mg/l	10/30/86	11/04/86
13324	WWTP EFFLUENT	GC/MS ACID		SEE ATTACHED	10/23/86	12/12/86
13324	WWTP EFFLUENT	GC/MS B/N		SEE ATTACHED	10/23/86	12/12/86
13324	WWTP EFFLUENT	GC/MS PEST/PCBS		SEE ATTACHED	10/23/86	12/12/86
13324	WWTP EFFLUENT	GC/MS VOA		SEE ATTACHED	10/23/86	12/12/86

ND = Not Detected (value reported is limit of detection)

APPROVED BY:

William F. Cowen

WILLIAM F. COWEN, PhD
SENIOR ANALYTICAL CHEMIST



STEARNS CATALYTIC CORPORATION

ORIGINAL
(Red)

12/15/86

Mr. Gardner Flynn
P.O. Box 1424
Malvern, Penna. 19355

Subject: C.I. Contract No. 99978
Mr. Gardner Flynn
LABORATORY ANALYSIS

Dear Mr. Flynn:

Attached is the analytical report for samples
submitted to us 10/23/86.

The samples "as received" were handled as described
in the report and the the reporting basis is noted.

If there are any questions, please do not hesitate
to contact me (215) 485-5377 or Joe Watt (215) 864-8542.

Very truly yours,

William F. Cowen, PhD.
Senior Analytical Chemist

ORIGINAL
(Red)

Form Approved: OMB No. 0586-0046, 5-11-79, 1-10-80

Journal of Management Inquiry 18(6)

P|A|D|O|4|4|3|4|4|4|5

Information: <http://www.fishbase.org>
 Submitted: 2006-07-27 15:00:00

**A State Manifest:
Deborah's Name**

NJA0241290

B. State Gen. 10
Same

Sales

C. State Transporter 1 !D

FD-302a (Rev. 11-29-10)

D. Transmitter's phone
(215) 822-8996

State Transporter 2 ID

F Transporter's Phone

(G. State Facility's ID

Facility's Phone (609) 881-7400

0400106

X732

RECEIVED

~~SECRET~~ - 187

Metro Containers Corp.

Adm. Des. 115

21

S02, To4
Filtration
Distillation

New Jersey ~~Special~~ Special Waste
Not a RCRA Hazardous Waste

DECLARATION: I, the undersigned, declare that the contents of this document are true and correct to the best of my knowledge and belief, and that I am a small business owner and operator who has been exempted by statute from the requirements of the Uniformed Services University of the Health Sciences (USUHS) for the purpose of this document.

1995, 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 26

and the only to make a waste management plan for the site, as required by the RA. The project has determined that the site is not a significant threat to public health and future threat to human health is not a concern.

De la **De la**

91 EVERY M. ZUCKIN

[illegible]

Steven M. Halperin

10/1/1971

Red 14-00000

Albert Siligman

— 24 —

Albert

12/16/1960

Ref: [REDACTED] ed Name: [REDACTED]

1. *Phragmites* (Common Reed)

Discrepancy Index: _____

Owner or Operator

2014

Michael J. ...

W. H. D. D. D.

1941

ORIGINAL
(Red)

Form Approved: OMB No. 2050-0047, 1-1-83, 4-83, 5-83, 6-83, 7-83, 8-83, 9-83, 10-83, 11-83, 12-83, 1-84, 2-84, 3-84, 4-84, 5-84, 6-84, 7-84, 8-84, 9-84, 10-84, 11-84, 12-84, 1-85, 2-85, 3-85, 4-85, 5-85, 6-85, 7-85, 8-85, 9-85, 10-85, 11-85, 12-85, 1-86, 2-86, 3-86, 4-86, 5-86, 6-86, 7-86, 8-86, 9-86, 10-86, 11-86, 12-86, 1-87, 2-87, 3-87, 4-87, 5-87, 6-87, 7-87, 8-87, 9-87, 10-87, 11-87, 12-87, 1-88, 2-88, 3-88, 4-88, 5-88, 6-88, 7-88, 8-88, 9-88, 10-88, 11-88, 12-88, 1-89, 2-89, 3-89, 4-89, 5-89, 6-89, 7-89, 8-89, 9-89, 10-89, 11-89, 12-89, 1-90, 2-90, 3-90, 4-90, 5-90, 6-90, 7-90, 8-90, 9-90, 10-90, 11-90, 12-90, 1-91, 2-91, 3-91, 4-91, 5-91, 6-91, 7-91, 8-91, 9-91, 10-91, 11-91, 12-91, 1-92, 2-92, 3-92, 4-92, 5-92, 6-92, 7-92, 8-92, 9-92, 10-92, 11-92, 12-92, 1-93, 2-93, 3-93, 4-93, 5-93, 6-93, 7-93, 8-93, 9-93, 10-93, 11-93, 12-93, 1-94, 2-94, 3-94, 4-94, 5-94, 6-94, 7-94, 8-94, 9-94, 10-94, 11-94, 12-94, 1-95, 2-95, 3-95, 4-95, 5-95, 6-95, 7-95, 8-95, 9-95, 10-95, 11-95, 12-95, 1-96, 2-96, 3-96, 4-96, 5-96, 6-96, 7-96, 8-96, 9-96, 10-96, 11-96, 12-96, 1-97, 2-97, 3-97, 4-97, 5-97, 6-97, 7-97, 8-97, 9-97, 10-97, 11-97, 12-97, 1-98, 2-98, 3-98, 4-98, 5-98, 6-98, 7-98, 8-98, 9-98, 10-98, 11-98, 12-98, 1-99, 2-99, 3-99, 4-99, 5-99, 6-99, 7-99, 8-99, 9-99, 10-99, 11-99, 12-99, 1-00, 2-00, 3-00, 4-00, 5-00, 6-00, 7-00, 8-00, 9-00, 10-00, 11-00, 12-00, 1-01, 2-01, 3-01, 4-01, 5-01, 6-01, 7-01, 8-01, 9-01, 10-01, 11-01, 12-01, 1-02, 2-02, 3-02, 4-02, 5-02, 6-02, 7-02, 8-02, 9-02, 10-02, 11-02, 12-02, 1-03, 2-03, 3-03, 4-03, 5-03, 6-03, 7-03, 8-03, 9-03, 10-03, 11-03, 12-03, 1-04, 2-04, 3-04, 4-04, 5-04, 6-04, 7-04, 8-04, 9-04, 10-04, 11-04, 12-04, 1-05, 2-05, 3-05, 4-05, 5-05, 6-05, 7-05, 8-05, 9-05, 10-05, 11-05, 12-05, 1-06, 2-06, 3-06, 4-06, 5-06, 6-06, 7-06, 8-06, 9-06, 10-06, 11-06, 12-06, 1-07, 2-07, 3-07, 4-07, 5-07, 6-07, 7-07, 8-07, 9-07, 10-07, 11-07, 12-07, 1-08, 2-08, 3-08, 4-08, 5-08, 6-08, 7-08, 8-08, 9-08, 10-08, 11-08, 12-08, 1-09, 2-09, 3-09, 4-09, 5-09, 6-09, 7-09, 8-09, 9-09, 10-09, 11-09, 12-09, 1-10, 2-10, 3-10, 4-10, 5-10, 6-10, 7-10, 8-10, 9-10, 10-10, 11-10, 12-10, 1-11, 2-11, 3-11, 4-11, 5-11, 6-11, 7-11, 8-11, 9-11, 10-11, 11-11, 12-11, 1-12, 2-12, 3-12, 4-12, 5-12, 6-12, 7-12, 8-12, 9-12, 10-12, 11-12, 12-12, 1-13, 2-13, 3-13, 4-13, 5-13, 6-13, 7-13, 8-13, 9-13, 10-13, 11-13, 12-13, 1-14, 2-14, 3-14, 4-14, 5-14, 6-14, 7-14, 8-14, 9-14, 10-14, 11-14, 12-14, 1-15, 2-15, 3-15, 4-15, 5-15, 6-15, 7-15, 8-15, 9-15, 10-15, 11-15, 12-15, 1-16, 2-16, 3-16, 4-16, 5-16, 6-16, 7-16, 8-16, 9-16, 10-16, 11-16, 12-16, 1-17, 2-17, 3-17, 4-17, 5-17, 6-17, 7-17, 8-17, 9-17, 10-17, 11-17, 12-17, 1-18, 2-18, 3-18, 4-18, 5-18, 6-18, 7-18, 8-18, 9-18, 10-18, 11-18, 12-18, 1-19, 2-19, 3-19, 4-19, 5-19, 6-19, 7-19, 8-19, 9-19, 10-19, 11-19, 12-19, 1-20, 2-20, 3-20, 4-20, 5-20, 6-20, 7-20, 8-20, 9-20, 10-20, 11-20, 12-20, 1-21, 2-21, 3-21, 4-21, 5-21, 6-21, 7-21, 8-21, 9-21, 10-21, 11-21, 12-21, 1-22, 2-22, 3-22, 4-22, 5-22, 6-22, 7-22, 8-22, 9-22, 10-22, 11-22, 12-22, 1-23, 2-23, 3-23, 4-23, 5-23, 6-23, 7-23, 8-23, 9-23, 10-23, 11-23, 12-23, 1-24, 2-24, 3-24, 4-24, 5-24, 6-24, 7-24, 8-24, 9-24, 10-24, 11-24, 12-24, 1-25, 2-25, 3-25, 4-25, 5-25, 6-25, 7-25, 8-25, 9-25, 10-25, 11-25, 12-25, 1-26, 2-26, 3-26, 4-26, 5-26, 6-26, 7-26, 8-26, 9-26, 10-26, 11-26, 12-26, 1-27, 2-27, 3-27, 4-27, 5-27, 6-27, 7-27, 8-27, 9-27, 10-27, 11-27, 12-27, 1-28, 2-28, 3-28, 4-28, 5-28, 6-28, 7-28, 8-28, 9-28, 10-28, 11-28, 12-28, 1-29, 2-29, 3-29, 4-29, 5-29, 6-29, 7-29, 8-29, 9-29, 10-29, 11-29, 12-29, 1-30, 2-30, 3-30, 4-30, 5-30, 6-30, 7-30, 8-30, 9-30, 10-30, 11-30, 12-30, 1-31, 2-31, 3-31, 4-31, 5-31, 6-31, 7-31, 8-31, 9-31, 10-31, 11-31, 12-31, 1-32, 2-32, 3-32, 4-32, 5-32, 6-32, 7-32, 8-32, 9-32, 10-32, 11-32, 12-32, 1-33, 2-33, 3-33, 4-33, 5-33, 6-33, 7-33, 8-33, 9-33, 10-33, 11-33, 12-33, 1-34, 2-34, 3-34, 4-34, 5-34, 6-34, 7-34, 8-34, 9-34, 10-34, 11-34, 12-34, 1-35, 2-35, 3-35, 4-35, 5-35, 6-35, 7-35, 8-35, 9-35, 10-35, 11-35, 12-35, 1-36, 2-36, 3-36, 4-36, 5-36, 6-36, 7-36, 8-36, 9-36, 10-36, 11-36, 12-36, 1-37, 2-37, 3-37, 4-37, 5-37, 6-37, 7

1. *Chlorophyll a* (Chl *a*)
 2. *Chlorophyll b* (Chl *b*)
 3. *Chlorophyll c* (Chl *c*)
 4. *Chlorophyll d* (Chl *d*)
 5. *Chlorophyll e* (Chl *e*)
 6. *Chlorophyll f* (Chl *f*)
 7. *Chlorophyll g* (Chl *g*)
 8. *Chlorophyll h* (Chl *h*)
 9. *Chlorophyll i* (Chl *i*)
 10. *Chlorophyll j* (Chl *j*)
 11. *Chlorophyll k* (Chl *k*)
 12. *Chlorophyll l* (Chl *l*)
 13. *Chlorophyll m* (Chl *m*)
 14. *Chlorophyll n* (Chl *n*)
 15. *Chlorophyll o* (Chl *o*)
 16. *Chlorophyll p* (Chl *p*)
 17. *Chlorophyll q* (Chl *q*)
 18. *Chlorophyll r* (Chl *r*)
 19. *Chlorophyll s* (Chl *s*)
 20. *Chlorophyll t* (Chl *t*)
 21. *Chlorophyll u* (Chl *u*)
 22. *Chlorophyll v* (Chl *v*)
 23. *Chlorophyll w* (Chl *w*)
 24. *Chlorophyll x* (Chl *x*)
 25. *Chlorophyll y* (Chl *y*)
 26. *Chlorophyll z* (Chl *z*)
 27. *Chlorophyll aa* (Chl *aa*)
 28. *Chlorophyll ab* (Chl *ab*)
 29. *Chlorophyll ac* (Chl *ac*)
 30. *Chlorophyll ad* (Chl *ad*)
 31. *Chlorophyll ae* (Chl *ae*)
 32. *Chlorophyll af* (Chl *af*)
 33. *Chlorophyll ag* (Chl *ag*)
 34. *Chlorophyll ah* (Chl *ah*)
 35. *Chlorophyll ai* (Chl *ai*)
 36. *Chlorophyll aj* (Chl *aj*)
 37. *Chlorophyll ak* (Chl *ak*)
 38. *Chlorophyll al* (Chl *al*)
 39. *Chlorophyll am* (Chl *am*)
 40. *Chlorophyll an* (Chl *an*)
 41. *Chlorophyll ao* (Chl *ao*)
 42. *Chlorophyll ap* (Chl *ap*)
 43. *Chlorophyll aq* (Chl *aq*)
 44. *Chlorophyll ar* (Chl *ar*)
 45. *Chlorophyll as* (Chl *as*)
 46. *Chlorophyll at* (Chl *at*)
 47. *Chlorophyll au* (Chl *au*)
 48. *Chlorophyll av* (Chl *av*)
 49. *Chlorophyll aw* (Chl *aw*)
 50. *Chlorophyll ax* (Chl *ax*)
 51. *Chlorophyll ay* (Chl *ay*)
 52. *Chlorophyll az* (Chl *az*)
 53. *Chlorophyll aza* (Chl *aza*)
 54. *Chlorophyll abz* (Chl *abz*)
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 56. *Chlorophyll adz* (Chl *adz*)
 57. *Chlorophyll aez* (Chl *aez*)
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 59. *Chlorophyll agz* (Chl *agz*)
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 69. *Chlorophyll aqz* (Chl *aqz*)
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 103. *Chlorophyll ayz* (Chl *ayz*)
 104. *Chlorophyll azz* (Chl *azz*)
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 127. *Chlorophyll awz* (Chl *awz*)
 128. *Chlorophyll axz* (Chl *axz*)
 129. *Chlorophyll ayz* (Chl *ayz*)
 130. *Chlorophyll azz* (Chl *azz*)
 131. *Chlorophyll azaa* (Chl *aza*)
 132. *Chlorophyll abz* (Chl *abz*)
 133.

3. State Manifest
Organization - name

NJA 0241290

B. State Gen ID

Salmon

C	State Transporter 1 ID
---	------------------------

008567JF 6110RT

D. Transporter's Phone
(715) 822-8296

E State Transponder 2 ID

F. Transporter's Phone

H. Facility's Phone (609) 631-7411

... ..

...K. H. 1999; codes for V...

Filtration
Distillation

20

Full Name

Full Name	Room	Room No.	Room Name
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7. Name

■■■■■

Owner or Operator Certification of receipt of hazardous waste by the transporter, except as required by 40 CFR 263.10(c)(1)(ii)(B).

Printed Name

SECRET

State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Form Approved. OMB No. 2000-0404. Expires 7-31

Print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS
WASTE MANIFEST

Generator's Name and Mailing Address

19013

Generator's Phone

Transporter 1 Company Name

Transporter 2 Company Name

Designated Facility Name and Site Address

DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

Additional Descriptions for Materials Listed Above

Special Handling Instructions and Additional Information

Generator's Certification

Transporter 1 Acknowledgement of Receipt of Materials

Transporter 2 Acknowledgement of Receipt of Materials

Emergency Contact

Owner or Operator Certification

Signature

Signature

Signature

Signature

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Signature

Generator's US EPA ID No.

Manifest Number

Page 1

Information in the shaded areas is not required by Federal law.

A. State Manifest Document Number **NJA020852**

B. State Gen. ID

C. State Transporter 1 ID

D. Transporter's Phone

E. State Transporter 2 ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

12. Containers 13. Total Quantity 14. Waste No.

15. Waste No.

16. Waste No.

17. Waste No.

18. Waste No.

19. Waste No.

20. Waste No.

21. Waste No.

22. Waste No.

23. Waste No.

24. Waste No.

25. Waste No.

26. Waste No.

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50. Waste No.

51. Waste No.

52. Waste No.

53. Waste No.

54. Waste No.

55. Waste No.

56. Waste No.

57. Waste No.

58. Waste No.

59. Waste No.

60. Waste No.

ORIGINAL
(Red)

or type. (Form designed for use on elite (12-pitch) typewriter.)

1. Generator's US EFA ID No

Gator's Name and Mailing Address

Metro Container Corp.
2111 E. 1st Ave.
St. Paul, Minn. 55104

Generator's Phone

The carrier is Company, Boston.

US EPA ID Number

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466
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US EPA ID Number:

Designated Facility Name and Site Address	
---	--

US EPA ID Number

Petroleum Recycling Co.
6000 Blvd
Channahon, IL 61312

1. SPOT Description, Location, Proper Sampling Name, Hazard Class, and ID Number:

Waste Oil N.O.S.

Compte N° 121

RECEIVED

JUN 11 1986

Electro Container Corp.

Corrosions of Materials Listed Above

K Handling codes for Wastes listed below

Special Handling Instructions and Additional Information

DECLARATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b)(1) of RCRA. I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Registered Name

Signature _____

Reporter 1 Acknowledgement of Receipt of Materials

Printed Name

Signature _____

Transporter	2	Accounting of Receipt of Materials
-------------	---	------------------------------------

Interviewed Name

Signature _____

Discrepancy Indicator: Space

Emergency Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 15

Field	Field Name
1	1
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3	3
4	4
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92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

Signature _____

Form 8700-22 (Rev. 4-87) Previous editions obsolete

State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Form Approved OMB No. 2000-0404 Expires 7-31-02

UNIFORM HAZARDOUS
WASTE MANIFEST

Generator's Name and Mailing Address

Generator's Phone

Transporter 1 Company Name

Transporter 2 Company Name

Designated Facility Name and Site Address

DOT Description including Proper Shipping Name, Hazard Class and ID Number

Additional Descriptions of Materials Listed Above

Special Handling Instructions and Additional Information

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this container are fully and accurately described above by proper shipping name and are classified properly marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste management certification under Section 3002(c) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Signature

Signature

Transporter 1 Acknowledgment of Receipt of Materials

Signature

Signature

Transporter 2 Acknowledgment of Receipt of Materials

Signature

Signature

Discrepancy Indicator

Facility Owner or Operator

Signature

Signature

**State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625**

**ORIGINAL
(Red)**

Form Approved OMB No. 2000-0404 Expires 7-2001

**UNIFORM HAZARDOUS
WASTE MANIFEST**

Generator's Name and Address 111401 2nd St Trenton, NJ 08625		Generator's Phone 609-291-1111		US EPA ID Number 10000000000000000000		A. State Manifest Document Number NJA015949	
Transporter 1 Company Name ABC		Transporter 1 US EPA ID Number 10000000000000000000		Transporter 1 State ID 58159		B. State Gen ID 58159	
Transporter 2 Company Name DEF		Transporter 2 US EPA ID Number 10000000000000000000		Transporter 2 State ID 609-887-6506		C. State Transporter 1 ID 58159	
Designated Facility Name and Site Address Delaware Valley Recycling and Recovery Center 10000000000000000000		Designated Facility US EPA ID Number 10000000000000000000		Facility's Phone 609-887-7400		D. Transporter's Phone 609-887-6506	
DOT Description Waste		DOT Hazardous Material Name and ID Number 10000000000000000000		Total Quantity 10000000000000000000		Waste No. 10000000000000000000	
Materials Listed Above		Handling codes for Wastes Listed Above		502, T04			
				F. Filter			
				Distillation			

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of the RCRA. I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Signature of Generator ACKIE	Signature of Transporter 1 John J. ...	Date 10/1/00
Signature of Transporter 2 Boyd	Signature of Facility Boyd	Date 10/1/00
Signature of Facility Boyd	Signature of Facility Boyd	Date 10/1/00

Signature of Receiver
Boyd

Signature of Owner or Operator
Boyd

Signature of Facility
Boyd

State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Form Approved. OMB No. 2000-0404. Expires 7-31-01

UNIFORM HAZARDOUS
WASTE MANIFEST

Generator's Name and Mailing Address Metro Container Corp 2ND ST. TRENTON PA		Generator's US EPA ID No. WUTD1213111313131313	State Manifest Document Number NJA0159546
Generator's Phone 615-411-1066		State Gen. ID SAME	State Transporter 1 ID NJDEP 59159
Transporter 1 Company Name A B C Tank Co		Transporter 1 US EPA ID Number WUTD1213111313131313	Transporter 1 Phone 609-891-6586
Transporter 2 Company Name PE Petroleum Recycling Inc.		Transporter 2 US EPA ID Number WUTD1213111313131313	Transporter 2 ID 609-891-7400
Disposal Facility Name and Site Address CEN. BLVD CLAYTON NJ 08611		Disposal Facility US EPA ID Number WUTD1213111313131313	Disposal Facility Phone 609-891-7400

Waste Description	Quantity	Weight	Volume
Waste Oil N.O.S.			
Combustible UN# 1202	1000 L	1000 KG	1000 L

Materials Listed Above	Handing codes for Wastes Listed Above S02-704
Special Handling Instructions and Additional Information	Filler or Dilution

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of the RCRA. I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Generator's Name Metco Container Corp	Signature <i>[Signature]</i>	Date 01/23/01
Transporter 1 Acknowledgement of Receipt of Materials Name HENRY BASCH JR	Signature <i>[Signature]</i>	Date 01/23/01
Transporter 2 Acknowledgement of Receipt of Materials Name [Blank]	Signature <i>[Signature]</i>	Date [Blank]
Discrepancy Indication Space		
Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in this space		
Facility Name [Blank]	Signature <i>[Signature]</i>	Date 01-23-01

**State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625**

**ORIGINAL
(Red)**

Form Approved. OMB No. 2000-0404. Expires 7-31-

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's Name and Mailing Address

2. Generator's US EPA ID No.

3. Page 1 of 1

Information in this manifest is not required by Federal law.

A. State Manifest Document Number

NJA 020853

B. State Gen. ID

SAME

C. State Transporter 1 ID

NJDER 5315

D. Transporter's Phone

609-657-6516

E. State Transporter 2 ID

F. Transporter's Phone

G. State Facility's ID

CE0116

H. Facility's Phone

609-651-1111

4. Generator's Phone

5. Transporter 1 Company Name

6. US EPA ID Number

7. Transporter 2 Company Name

8. US EPA ID Number

10. US EPA ID Number

9. Designated Facility Name and Site Address

11. DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

12. Container

13

Quantity

14

Wt/Vol

Waste No.

15. Additional Descriptions for Materials Listed Above

K. Handling codes for Wastes Listed Above

a. **S02, D04**

b. **Filter &**

c. **Distillation**

16. Special Handling Instructions and Additional Information

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and applicable state laws and regulations. I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA. I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

17. Generator's Name

Signature

Month Day Year

18. Transporter 1 Acknowledgement of Receipt of Materials

19. Transporter's Name

Signature

Date

20. Transporter 2 Acknowledgement of Receipt of Materials

21. Transporter's Name

Signature

Date

22. Discrepancy Indication Space

23. Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted otherwise.

24. Owner's Name

Signature

Date

**State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625**

Form Approved OMB No. 2000-0404

ORIGINAL
(Red)

or type. (Form designed for use on elite (12-pitch) typewriter.)

FORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. <u>120000000000000000</u>	2. State Manifest Document Number NJA0159495
--------------------------------------	--	---

Generator's Name and Mailing Address <u>Netco</u>	A. State Manifest Document Number NJA0159495
Generator's Phone <u>609-881-1666</u>	B. State Gen. ID <u>SAME</u>

Transporter 1 Company Name <u>BC</u>	US EPA ID Number <u>120000000000000000</u>	C. State Transporter 1 ID <u>NJDEP 5855</u>
Transporter 2 Company Name	US EPA ID Number	D. Transporter's Phone <u>609-881-6586</u>

Designated Facility Name and Site Address <u>Ret. Site, Hocking St. Clay, NJ</u>	US EPA ID Number <u>120000000000000000</u>	E. State Transporter 2 ID
		F. Transporter's Phone
		G. State Facility's ID <u>08018</u>
		H. Facility's Phone <u>609-881-7100</u>

WASTE DESCRIPTION	12. Containers	13. Total Quantity	14. Unit Weight	Waste No.
<u>Waste</u>				<u>1211-1-1000 1 21</u>

Additional Descriptions of Materials Listed Above <u>L, T</u>	K. Handling instructions for Wastes Listed Above <u>SO₂ TO₄ FILTER & DISTILL</u>
--	---

Special Handling Instructions and Additional Information

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are fully and accurately described, classified, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b). I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable. I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Signature of Generator <u>JACKIE WARNER</u>	Signature <u>Jackie Warner</u>	Date Month Day Year
Transporter 1 Acknowledgement of Receipt of Materials	Signature <u>Boyd Clam...</u>	Date Month Day Year
Transporter 2 Acknowledgement of Receipt of Materials	Signature	Date Month Day Year

Emergency Indication Space

Owner or Operator Certification of receipt of hazardous material covered by this manifest except as noted in the following:

Signature <u>Boyd Clam...</u>	Signature <u>Boyd Clam...</u>	Date Month Day Year
----------------------------------	----------------------------------	------------------------

State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Printer type: (Form designed for use on elite (12-pitch) typewriter)

Form approved by OMB No. 2000-0404, E-11/00

HAZARDOUS
WASTE MANIFEST

Generator's Name and Address:

State Agency

NJA0159497

State ID

Generator's Phone:

Transporter 1 Code:

US EPA ID Number

State Transporter 1 ID

Transporter 2 Code:

US EPA ID Number

State Transporter 2 ID

Designated Facility, Name and Address:

US EPA ID Number

State Facility ID

Facility's Phone

Material Description:

12

13

Weight

Volume

Material Descriptions:

Materials Listed Above

Numbered copies for Material

Material Handling Instructions:

Additional Information

Generator's Certification:

I hereby declare that the contents of this manifest are fully and accurately described above by proper shipping name and are classified, labeled, marked, and packaged in all respects in proper condition for transport by highway according to applicable international and national government regulations. I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste management certification under Section 3002 of the RA. I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable. I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Typed Name

Signature

Transporter 1 Acceptance:

Acceptance of Receipt of Materials

Signature

Typed Name

Transporter 2 Acceptance:

Acceptance of Receipt of Materials

Signature

Typed Name

Facility Owner Acceptance:

Signature

Facility Owner Name:

Typed Name

Typed Name

Signature

Form 00-22

State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Form type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2060-0404. Expires 7-31-80

UNIFORM HAZARDOUS
WASTE MANIFEST

Generator's Name and Address		Manifest Number NJA0159495	
Generator's Phone		State Gen ID	
Transporter 1 Name		State Transporter 1 ID	
Transporter 1 Phone		Transporter's Phone	
Transporter 2 Name		State Transporter 2 ID	
Transporter 2 Phone		Transporter's Phone	
Designated Facility Name		State Facility's ID	
Designated Facility Phone		Facility's Phone	

DOT Description	Material Name	UN ID Number	HAZARDOUS	WASTE No.

Material Descriptions of Materials Listed Above	Handling codes for Materials Listed Above

Special Handling Instructions and Additional Information

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are fully and accurately described above. The materials are properly marked, labeled, and are in all respects in proper condition for transport by highway according to applicable international and federal government regulations. I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of the Act. I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Generator's Name	Signature
Transporter 1 Acknowledgment of Receipt of Materials	Signature
Transporter 2 Acknowledgment of Receipt of Materials	Signature

Discrepancy Indicator
Owner or Operator
Signature

State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Form Approved. OMB No. 2000-0404. Expires 7-31-8

Form or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS
WASTE MANIFEST

1 Generator's US EPA ID No

Master
Document No.

2 Page 1
of

Information in the shaded areas
is not required by Federal law.

Generator's Name and Mailing Address

A. State Manifest
Document Number

NJA 0208539

B. State Gen. ID

Generator's Phone

Transporter 1 Company Name

6

US EPA ID Number

C. State Transporter 1 ID

Transporter 2 Company Name

8

US EPA ID Number

D. Transporter's Phone

Designated Facility Name and Site Address

10

US EPA ID Number

E. State Transporter 2 ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

1. Waste Description (including Proper Shipping Name, Hazard Class, and ID Number)

12 Containers

No.

Type

13 Total Quantity

14 Unit
wt/vol

I. Waste No

Additional Descriptions for Materials Listed Above

c.

K. Handling codes for Wastes Listed Above

a.

c.

d.

b.

d.

Special Handling Instructions and Additional Information

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations, and I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA. I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Generator's Name

Signature

Month Day Year

Transporter 1 Acknowledgement of Receipt of Materials

Generator's Name

Signature

Month Day Year

Transporter 2 Acknowledgement of Receipt of Materials

Generator's Name

Signature

Month Day Year

Emergency Indication Space

Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19

Generator's Name

Signature

Month Day Year

**ORIGINAL
(Red)**

Form Approved OMB No. 2060-0464, Exp.

1. Generalization (A17) (1971)

NJA0159573

State Gen ID

1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 84

State Transporter ID

W. TRENKLE'S PHOTO

F State Transconter 2 ID

Transfer to Phone

C. State Faculty, 50

خدا را، و آنچه در میان ما و شماست

1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

| | | | |
|--|----------------|--------------|----------|
| | Total Quantity | Unit
7070 | Weight % |
|--|----------------|--------------|----------|

* Handling codes for Weapons & Explosives

Registered Name

Suppose

Registered Name

שִׁמְרָה

Transporter 2 Acknowledgment of Receipt of Materials

Registered Name

Summary

Discrepancy Indication: _____

Owner or Operator: Contractor, Department of the Army

ad. Name

2019

**ORIGINAL
(Red)**

or type. (Form designed for use on elite (12 pitch) typewriter.)

Form Approved: OMB No. 2000-0404; Exp. 06-30-2006

UNIFORM HAZARDOUS WASTE MANIFEST

Operator's Name and: [REDACTED]

Operator's Phone

[illegible]

| | | |
|---------|---|-------------|
| Printer | 2 | Compl. Name |
|---------|---|-------------|

[illegible]

| OT Description | Shipping Name | Weight | ID Number |
|----------------|---------------|--------|-----------|
| | | | |

[illegible]

| Actual Descriptions | Materials Listed Above |
|---------------------|------------------------|
| 1. 100% Cotton | Cotton |
| 2. 100% Polyester | Polyester |
| 3. 100% Nylon | Nylon |
| 4. 100% Rayon | Rayon |
| 5. 100% Silk | Silk |
| 6. 100% Wool | Wool |
| 7. 100% Linen | Linen |
| 8. 100% Leather | Leather |
| 9. 100% Rubber | Rubber |
| 10. 100% Glass | Glass |
| 11. 100% Metal | Metal |
| 12. 100% Plastic | Plastic |
| 13. 100% Paper | Paper |
| 14. 100% Fabric | Fabric |
| 15. 100% Wood | Wood |
| 16. 100% Stone | Stone |
| 17. 100% Concrete | Concrete |
| 18. 100% Brick | Brick |
| 19. 100% Tile | Tile |
| 20. 100% Paint | Paint |
| 21. 100% Ink | Ink |
| 22. 100% Glue | Glue |
| 23. 100% Nails | Nails |
| 24. 100% Screws | Screws |
| 25. 100% Bolts | Bolts |
| 26. 100% Washers | Washers |
| 27. 100% Brackets | Brackets |
| 28. 100% Hinges | Hinges |
| 29. 100% Locks | Locks |
| 30. 100% Handles | Handles |
| 31. 100% Knobs | Knobs |
| 32. 100% Pulls | Pulls |
| 33. 100% Catches | Catches |
| 34. 100% Latches | Latches |
| 35. 100% Bolts | Bolts |
| 36. 100% Screws | Screws |
| 37. 100% Nails | Nails |
| 38. 100% Washers | Washers |
| 39. 100% Brackets | Brackets |
| 40. 100% Hinges | Hinges |
| 41. 100% Locks | Locks |
| 42. 100% Handles | Handles |
| 43. 100% Knobs | Knobs |
| 44. 100% Pulls | Pulls |
| 45. 100% Catches | Catches |
| 46. 100% Latches | Latches |
| 47. 100% Bolts | Bolts |
| 48. 100% Screws | Screws |
| 49. 100% Nails | Nails |
| 50. 100% Washers | Washers |
| 51. 100% Brackets | Brackets |
| 52. 100% Hinges | Hinges |
| 53. 100% Locks | Locks |
| 54. 100% Handles | Handles |
| 55. 100% Knobs | Knobs |
| 56. 100% Pulls | Pulls |
| 57. 100% Catches | Catches |
| 58. 100% Latches | Latches |
| 59. 100% Bolts | |

X Handling codes for Wastes Using Aqueous

Special Handling Instructions and Additional Information

DECLARATION: I, the undersigned, hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste management certification under Section 3002(b), RA. I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Interpolated Name

Signature

| | | | |
|----------|---|-----|-------------------------------------|
| Reporter | 1 | ACK | Requirement of Receipt of Materials |
|----------|---|-----|-------------------------------------|

Interpolated Name

Signature _____

| | | |
|-------------|---|-------------------------------------|
| Transporter | 2 | Acquisition of Receipt of Materials |
|-------------|---|-------------------------------------|

Typed Name

Summary:

Discrepancy Indicator: 5340

Owner or Owner's Contribution (in percent of total sales) _____ Covered by this manifest except as noted below _____

Printed Name

Signature _____



State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Form designed for use on elite (12-pitch) typewriter.

Form Approved. OMB No. 2000-0404. Expires 7-17-85

UNIFORM HAZARDOUS
WASTE MANIFEST

Generator's Name and Address
**METRO CONTAINER CORP
TRAINER RD AND ST**

Generator's Phone
201 972 1111

Transporter 1 Company Name
B-C TRUCK CO

Disposal Facility Name and Site Address
PETROLEUM REFINERY

Waste Description (Including Proper Shipping Name and ID Number)
**WASTE OIL NO. 2
Combustible UN 1202**

A. State Manifest Document Number
NJA0159573

B. State Gen. ID
SAME

C. State Transporter 1 ID
USWA-58159A

D. Transporter's Phone
609-831-0586

E. State Transporter 2 ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone
609-831-7400

RECEIVED
APR 22 1986

Materials Listed Above

K. Handling codes for Wastes Listed Above
**S02, T04
Filter +
Distillation**

Special Handling Instructions and Additional Information

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this Commodity are fully and accurately described above by proper shipping name and are classified, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b), and I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Generator's Name
STEVEN ZUBRIN

Signature
[Signature]

Transporter 1 Acknowledgment of Receipt of Materials
HEIDI ZUBRIN JR

Signature
[Signature]

Transporter 2 Acknowledgment of Receipt of Materials

Signature

Discrepancy Indication Space

Receiver's Owner or Operator Certification: I accept of hazardous materials covered by this manifest except as noted below.

Receiver's Name
Mr. [Signature]

Signature
[Signature]

PINK - DISPOSAL FACILITY

ELDRIDGE

INC.

ENVIRONMENTALLY
CONSCIOUS
WASTE REMOVAL898 FERN HILL RD., WEST CHESTER, PA. 19380
(215) 459-1017 • (215) 436-4749

DATE ORDERED: _____

H.W. MANIFEST # _____

ORIGINAL
(Red)

PERMITS: _____

GENERATOR METRO CONTAINER

EPA I.D. NO. _____

ADDRESS 2nd AND BRICK STREETS, TRAINER, PA. 19013PHONE 215 485 7203

I certify that the material described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported under the applicable regulations of the Environmental Protection Agency and the Department of Transportation.

Authorized Signature (Generator) _____

Printed Signature _____

Date _____

TRANSPORTER Eldredge, Inc.

EPA I.D. NO. _____

PAD014146179

ADDRESS 898 Fernhill Road, West Chester, PA 19380PHONE 215-436-4749

This is to certify acceptance of the waste for transportation.

SIGNATURE _____

PRINT NAME _____

DATE _____

TREATMENT/STORAGE/DISPOSAL FACILITY FORECAST ENTERPRISES

EPA I.D. NO. _____

ADDRESS _____

PHONE _____

THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT/STORAGE/DISPOSAL

SIGNATURE: _____

PRINT NAME: _____

DATE: _____

| H. M. | E. P. A. DESCRIPTION
D. O. T. SHIPPING NAME | HAZARD
CLASS | UN
NUMBER | FORM | WEIGHT
VOLUME | NO. AND
TYPES/CONT. | EPA
HAZ | EPA
WASTE |
|-------|--|-----------------|--------------|-------|------------------|------------------------|------------|--------------|
| | MT. HAZARDOUS WASTE | NON2 | NON2 | SOLID | | 1 CONT.
DUMPSITE | NON2 | NON2 |

SPECIAL HANDLING INSTRUCTIONS/COMMENTS:

FOUNDESSY P.C.N. 90743A

PLACARDS PROVIDED/AFFIXED

1. _____
2. _____

DRIVERS SIGNATURE: _____

EMERGENCY INFORMATION _____

PHONE _____

NATIONAL RESPONSE CENTER U.S.C.O. 800-424-8802

CHEMTREX 800-424-9300

DAY/TIME

EVENT

SERVICE PERFORMED

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COST

UNIT

HOW MANY

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TOTAL

ELDREDGE

INC.

ENVIRONMENTALLY
CONSCIOUS
WASTE REMOVAL898 FERN HILL RD., WEST CHESTER, PA. 19380
(215) 459-1017 • (215) 436-4749

DATE ORDERED: _____

H.W. MANIFEST # ORIGINAL
(Reg)

PERMITS: _____

| | |
|--|------------------------------------|
| GENERATOR <u>METRO CONTAINER</u> | EPA I.D. NO. _____ |
| ADDRESS <u>2nd AND PRICE STREETS, TRAINER, PA. 19013</u> | PHONE <u>215 485 7903</u> |
| I certify that the material described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported under the applicable regulations of the Environmental Protection Agency and the Department of Transportation. | |
| Authorized Signature (Generator) _____ | Printed Signature _____ Date _____ |

| | |
|--|---|
| TRANSPORTER <u>Eldredge, Inc.</u> | EPA I.D. NO. <u>PAD014146179</u> |
| ADDRESS <u>898 Fernhill Road, West Chester, PA 19380</u> | PHONE <u>215-436-4749</u> |
| This is to certify acceptance of the waste for transportation. | |
| SIGNATURE <u>John Balle</u> | PRINT NAME <u>JOHN BALLE</u> DATE <u>11/21/84</u> |

| | |
|--|--|
| TREATMENT/STORAGE/DISPOSAL FACILITY <u>FONDESSY ENTERPRISES</u> | EPA I.D. NO. _____ |
| ADDRESS _____ | PHONE _____ |
| THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT/STORAGE/DISPOSAL | |
| SIGNATURE <u>Mark V. ...</u> | PRINT NAME <u>MARK V. ...</u> DATE <u>11-27-84</u> |

| H. M. | E. P. A. DESCRIPTION
D. O. T. SHIPPING NAME | HAZARD
CLASS | UN
NUMBER | FORM | WEIGHT
VOLUME | NO. AND
TYPES CONT | EPA
HAZ | EPA
WASTE |
|-------|--|-----------------|--------------|-------|------------------|-----------------------|------------|--------------|
| | NON HAZARDOUS WASTE | NONE | NONE | SOLID | 40440
213A + | 1 CONT.
DUMPSTER | NONE | |

| | |
|--|---------------------------|
| SPECIAL HANDLING INSTRUCTIONS/COMMENTS:

<u>FONDESSY P.C.N. #0743A</u> | PLACARDS PROVIDED/AFFIXED |
| | 1. _____ |
| | 2. _____ |
| DRIVERS SIGNATURE: _____ | |

| | |
|--|------------------------|
| EMERGENCY INFORMATION _____ | PHONE _____ |
| NATIONAL RESPONSE CENTER U.S.C.O. 800-424-8802 | CHEMTRECT 800-424-9300 |

| DAY/TIME | EVENT |
|----------|--------|
| 11/21/84 | |
| 14:00 | D. ELD |
| 11:30 | A. 6A |
| 14:55 | D. 6A |
| 15:45 | A. ELD |
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SERVICE PERFORMED

| CENTER | COST | UNIT | HOW MANY | AMOUNT |
|--------|------|------|----------|--------|
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TOTAL

BILLING ADDRESS: EAST COAST CHEM. SLS.

Waste Conversion INC.

2869 Sandstone Drive / Hatfield, Penna. 19440



| | | | | | |
|--|--|---|--|--|---------------|
| Manifest Number <u>28122</u> Date <u>1-4-88</u> | | STRAIGHT
BILL OF LADING
NON NEGOTIABLE | | COMMONWEALTH OF PENNSYLVANIA
DEPT. OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
PROCESSING FACILITY
PERMIT NO. 300694 | |
| Received, subject to the classifications and tariffs in effect on the date of issue of this original Bill of Lading. | | | | | |
| The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as shown below, which said company (the word company being understood through this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes, or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns. | | | | | |
| DATE OF PICKUP <u>1-4-88</u> | | EPA IDENTIFICATION CODE NO. <u>PAD044545896</u> | | | |
| GENERATOR <u>Metro Container Corporation</u> | | ADDRESS <u>2nd and Price Streets</u> | | | |
| CITY <u>Trainer</u> | STATE <u>PA</u> | ZIP <u>19016</u> | PHONE <u>215 485 6100</u> | | |
| CONSIGNEE/TREATMENT/STORAGE/DISPOSAL FACILITY <u>WASTE CONVERSION INC.</u> | | EPA IDENTIFICATION CODE NO. <u>PAD085690592</u> | | | |
| ADDRESS <u>HATFIELD</u> | | 2869 SANDSTONE DRIVE | | | |
| CITY <u>HATFIELD</u> | STATE <u>PA</u> | ZIP <u>19440</u> | PHONE <u>215-822-8996</u> | | |
| THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT STORAGE DISPOSAL | | | | | |
| SIGNATURE _____ | | PRINT NAME _____ | | DATE _____ | |
| No. and Types Cont. | E.P.A. Description or D.O.T. Shipping Name | | Hazard Class | | Weight Volume |
| 1 T/T | Non Hazardous Waste Liquid | | Non Regulated Material | | 05200 G |
| SPECIAL HANDLING INSTRUCTIONS/COMMENTS
NOT A HAZARDOUS WASTE PER SUB PART C D PART 261 40 CFR | | | PLACARDS PROVIDED/AFFIXED
1 Drive Safely
2 _____
x _____ | | |
| Lab Code No. <u>2905</u> | | | DRIVERS SIGNATURE <u>R. K. [Signature]</u> | | |
| EMERGENCY INFORMATION!!!
Call Generator, (print) <u>Metro Container Corporation</u> | | | CALL: CHEMTREX 800-424-9300
Phone No. A/C <u>215 485 6100</u> | | |
| I certify that the materials described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported in commerce under the applicable regulations of the Federal Environmental Protection Agency and the Federal Department of Transportation. | | | | | |
| Generator Certification <u>[Signature]</u> | | | Printed Name <u>NORMAN BACKUS</u> Date Shipped <u>1-4-88</u> | | |
| TRANSPORTER
COMPANY <u>WASTE CONVERSION INC.</u> | | | EPA IDENTIFICATION CODE NO. <u>PAD085690592</u> | | |
| ADDRESS <u>HATFIELD</u> | | | 2869 SANDSTONE DRIVE | | |
| CITY <u>HATFIELD</u> | STATE <u>PA</u> | ZIP <u>19440</u> | PHONE <u>215-822-8996</u> | | |
| This is to certify acceptance of the above described waste for transportation | | | Signature <u>[Signature]</u> PRINT NAME <u>Michael Backus</u> DATE <u>1-4-88</u> | | |
| TRACTOR <u>37</u> | | TRAILER <u>1080</u> | | DRIVER <u>[Signature]</u> | |
| DEPARTED <u>8 A.M.</u> | | ARRIVE WASTE CONVERSION <u>10 A.M.</u> | | TOTAL DELAY TIME <u>1 1/2 hrs</u> | |
| ARRIVAL AT CUSTOMER <u>10 A.M.</u> | | REASON FOR DELAY <u>1 1/2 hrs</u> | | AUTHORIZED SIGNATURE <u>[Signature]</u> | |
| STARTED LOADING <u>1030</u> | | | | | |
| END LOADING <u>1130</u> | | | | | |
| DEPARTED CUSTOMER <u>1130</u> | | | | | |
| Net Weight: _____ (pounds) | | Gallons: _____ | | | |
| SpGr: _____ | | Unloaded To: _____ | | | |
| pH: _____ | | Unloaded By: _____ | | | |
| % Acid. as _____ | | Date Unloaded: _____ | | | |
| Other Tests: _____ | | Time Unloaded: _____ | | | |

Waste Conversion INC.

2869 Sandstone Drive / Hatfield, Penna. 19440

ORIGINAL
(Red)

| | | | | | |
|--|--|---|-------------|--|---------------------------|
| Manifest Number <u>25790</u> Date <u>7-22-87</u> | | STRAIGHT
BILL OF LADING
NON NEGOTIABLE | | COMMONWEALTH OF PENNSYLVANIA
DEPT. OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
PROCESSING FACILITY
PERMIT NO. 300694 | |
| Received, subject to the classifications and tariffs in effect on the date of issue of this original Bill of Lading. | | | | | |
| The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as shown below, which said company (the word company being understood through this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes, or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns. | | | | | |
| DATE OF PICKUP <u>7-22-87</u> | | EPA IDENTIFICATION CODE NO. <u>PAD044545895</u> | | | |
| GENERATOR <u>Metro Container Corporation</u> | | ADDRESS <u>2nd and Price Streets</u> | | | |
| CITY <u>Trainer</u> | | STATE <u>PA</u> | | ZIP <u>19016</u> | PHONE <u>215 485 6100</u> |
| CONSIGNEE/TREATMENT/STORAGE/DISPOSAL FACILITY | | EPA IDENTIFICATION CODE NO. <u>PAD085690592</u> | | | |
| CONSIGNEE TO <u>WASTE CONVERSION INC.</u> | | ADDRESS <u>2869 SANDSTONE DRIVE</u> | | | |
| CITY <u>HATFIELD</u> | | STATE <u>PA</u> | | ZIP <u>19440</u> | PHONE <u>215-822-8996</u> |
| THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT STORAGE DISPOSAL | | | | | |
| SIGNATURE _____ | | PRINT NAME _____ | | DATE _____ | |
| No. and Types Cont. | E.P.A. Description or D.O.T. Shipping Name | | | Hazard Class | Weight Volume |
| 1T/T | Non Hazardous Waste Liquid waste pit sludge from drum washings | | | Non Regulated Material | NO LEAK |
| SPECIAL HANDLING INSTRUCTIONS/COMMENTS
NOT A HAZARDOUS WASTE PER SUB
PART C D PART 261 40 CFR Lab Code No. <u>2905</u> | | | | PLACARDS PROVIDED/AFFIXED
1. <u>Drive Safely</u>
2. <u>0000</u> x _____
DRIVERS SIGNATURE _____ | |
| EMERGENCY INFORMATION!!!
Call Generator, (print) <u>Metro Container Corporation</u> Phone No. A/C <u>215 485 6100</u> CALL: CHEMTRECT 800-424-9300 | | | | | |
| I certify that the materials described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported in commerce under the applicable regulations of the Federal Environmental Protection Agency and the Federal Department of Transportation. | | | | | |
| Generator Certification <u>[Signature]</u> Printed Name <u>PETER C. ARREY</u> Date Shipped <u>7/22/87</u> | | | | | |
| TRANSPORTER
COMPANY <u>WASTE CONVERSION INC.</u> | | EPA IDENTIFICATION CODE NO. <u>PAD085690592</u> | | | |
| CITY <u>HATFIELD</u> STATE <u>PA</u> ZIP <u>19440</u> | | PHONE <u>215-822-8996</u> | | | |
| This is to certify acceptance of the above described waste for transportation. | | | | | |
| SIGNATURE <u>[Signature]</u> | | PRINT NAME <u>STEPHEN STARS</u> | | DATE <u>7-22-87</u> | |
| TRACTOR <u>34</u> | | TRAILER <u>590VAL</u> | | DRIVER <u>[Signature]</u> | |
| DEPARTED _____ | | A.M. | P.M. | ARRIVE WASTE CONVERSION _____ | |
| ARRIVAL AT CUSTOMER _____ | | | <u>3:55</u> | TOTAL DELAY TIME _____ | |
| STARTED LOADING _____ | | | — | REASON FOR DELAY <u>Could not get to place so</u> | |
| END LOADING _____ | | | — | <u>The Car Pump</u> | |
| DEPARTED CUSTOMER _____ | | | <u>3:35</u> | AUTHORIZED SIGNATURE _____ | |
| Net Weight: _____ (pounds) | | Gallons: _____ | | | |
| SpGr: _____ | | Unloaded To: _____ | | | |
| pH: _____ | | Unloaded By: _____ | | | |
| % Acid, as _____ | | Date Unloaded: _____ | | | |
| Other Tests: _____ | | Time Unloaded: _____ | | | |

White — GENERATOR FILE
Blue — TRANSPORTER FILE
Green — PROCESSING FACILITY

Yellow — RETURN TO GENERATOR
Pink — DEPT. ENVIRONMENTAL RESOURCES

White — HATFIELD TWP. SEWER AUTHORITY
White — PROCESSING FACILITY

FORM #102

Waste Conversion

INC.

2869 Sandstone Drive / Hatfield, Penna. 19440

ORIGINAL
(Red)

| | | | | | |
|--|--|--|--|--|--|
| Manifest Number 25800 Date 7-24-87 | | STRAIGHT
BILL OF LADING
NON NEGOTIABLE | | COMMONWEALTH OF PENNSYLVANIA
DEPT. OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
PROCESSING FACILITY
PERMIT NO. 300694 | |
| Received, subject to the classifications and tariffs in effect on the date of issue of this original Bill of Lading. | | | | | |
| The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as shown below, which said company (the word company being understood through this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes, or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns. | | | | | |
| DATE OF PICKUP 7-24-87 EPA IDENTIFICATION CODE NO. PAD044545895 | | | | | |
| GENERATOR Metro Container Corporation ADDRESS 2nd and Price Streets | | | | | |
| CITY Trainer STATE PA ZIP 19016 PHONE 215 485 6100 | | | | | |
| CONSIGNEE/TREATMENT/STORAGE/DISPOSAL FACILITY EPA IDENTIFICATION CODE NO. PAD085690592 | | | | | |
| CONSIGNEE TO WASTE CONVERSION INC. ADDRESS 2869 SANDSTONE DRIVE | | | | | |
| CITY HATFIELD STATE PA ZIP 19440 PHONE 215-822-8996 | | | | | |
| THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT STORAGE DISPOSAL | | | | | |
| SIGNATURE _____ PRINT NAME _____ DATE _____ | | | | | |
| No. and Types Cont. | | E.P.A. Description or D.O.T. Shipping Name | | Hazard Class | |
| 1 T/T | | Non Hazardous Waste Liquid waste pit sludge from drum washings | | Non Regulated Material | |
| | | | | Weight Volume 5.000 gals | |
| SPECIAL HANDLING INSTRUCTIONS/COMMENTS
NOT A HAZARDOUS WASTE PER SUB PART C D PART 261 40 CFR Lab Code No. 2905 | | | | PLACARDS PROVIDED/AFFIXED
1. Drive safely
2. 0000 X Stephen Huns | |
| EMERGENCY INFORMATION!!!
Call Generator. (print) Metro Container Corporation | | | | CALL: CHEMTREX 800-424-9300
Phone No. A/C 215 485 6100 | |
| I certify that the materials described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported in commerce under the applicable regulations of the Federal Environmental Protection Agency and the Federal Department of Transportation. | | | | | |
| Generator Certification [Signature] Printed Name PETER R. ROSEY Date Shipped 7-24-87 | | | | | |
| TRANSPORTER
COMPANY WASTE CONVERSION INC. ADDRESS 2869 SANDSTONE DRIVE | | | | | |
| CITY HATFIELD STATE PA ZIP 19440 PHONE 215-822-8996 | | | | | |
| EPA IDENTIFICATION CODE NO. PAD085690592 | | | | | |
| This is to certify acceptance of the above described waste for transportation. | | | | | |
| SIGNATURE [Signature] PRINT NAME STEPHEN STREVS DATE 7-24-87 | | | | | |
| TRACTOR 34 TRAILER 790 AC DRIVER [Signature] | | | | | |
| DEPARTED | | A.M. 5:30 P.M. | | ARRIVE WASTE CONVERSION | |
| ARRIVAL AT CUSTOMER | | 7:00 | | TOTAL DELAY TIME 55 min. had to wait for truck | |
| STARTED LOADING | | 7:30 | | REASON FOR DELAY was on the way & loading time | |
| END LOADING | | 8:45 | | AUTHORIZED SIGNATURE [Signature] | |
| DEPARTED CUSTOMER | | 8:55 | | | |
| Net Weight: _____ (pounds) | | Gallons: _____ | | Unloaded To: _____ | |
| SpGr: _____ | | Unloaded By: _____ | | Date Unloaded: _____ | |
| pH: _____ | | Time Unloaded: _____ | | no _____ | |
| % Acid, as _____ | | | | | |
| Other Tests: _____ | | | | | |

White - GENERATOR FILE
Blue - TRANSPORTER FILE
Green - PROCESSING FACILITYYellow - RETURN TO GENERATOR
Pink - DEPT. ENVIRONMENTAL RESOURCESWhite - HATFIELD TWP. SEWER AUTHORITY
White - PROCESSING FACILITY

FORM 1100

Waste Conversion INC.

2869 Sandstone Drive / Hatfield, Penna. 19440

ORIGINAL
(Red)

| | | | | | |
|--|--|---|--|--|---------------------------|
| Manifest Number <u>No. 19867</u> Date <u>7-30-86</u> | | STRAIGHT
BILL OF LADING
NON NEGOTIABLE | | COMMONWEALTH OF PENNSYLVANIA
DEPT. OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
PROCESSING FACILITY
PERMIT NO. 300694 | |
| Received, subject to the classifications and tariffs in effect on the date of issue of this original Bill of Lading. | | | | | |
| The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as shown below, which said company (the word company being understood through this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes, or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns. | | | | | |
| DATE OF PICKUP <u>7-30-86</u> | | EPA IDENTIFICATION CODE NO. <u>PAD 04 HSH 5895</u> | | | |
| GENERATOR <u>METRO CONTAINER CORP.</u> | | ADDRESS <u>IND + PRILE STS.</u> | | | |
| CITY <u>TRAINER</u> | | STATE <u>PA</u> | | ZIP <u>19016</u> | PHONE <u>215-485-6100</u> |
| CONSIGNEE/TREATMENT/STORAGE/DISPOSAL FACILITY | | EPA IDENTIFICATION CODE NO. <u>PAD085690592</u> | | | |
| CONSIGNEE TO <u>WASTE CONVERSION INC.</u> | | ADDRESS <u>2869 SANDSTONE DRIVE</u> | | | |
| CITY <u>HATFIELD</u> | | STATE <u>PA</u> | | ZIP <u>19440</u> | PHONE <u>215-822-8996</u> |
| THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT STORAGE DISPOSAL | | | | | |
| SIGNATURE _____ | | PRINT NAME _____ | | DATE _____ | |
| No. and Types Cont. | E.P.A. Description or D.O.T. Shipping Name | | | Hazard Class | Weight Volume |
| <u>1 TT</u> | <u>WASTE PIT SLUDGE FROM DRUM WASHING</u> | | | <u>NEW-REG MATERIAL</u> | <u>5000 lb</u> |
| SPECIAL HANDLING INSTRUCTIONS/COMMENTS
<u>NOT HAZARDOUS</u>
<u>PER SUB PART CE PA-241-40 CFR</u> | | | | PLACARDS PROVIDED/AFFIXED
1. <u>0000</u>
2. <u>DANGER SAFETY</u> | |
| Lab Code No. <u>2905</u> | | | | DRIVERS SIGNATURE <u>John Frederick</u> | |
| EMERGENCY INFORMATION!!!
Call Generator. (print) <u>215-485-6100</u> | | | | CALL CHEMTREX. 800-424-9300
Phone No. A/C _____ | |
| I certify that the materials described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported in commerce under the applicable regulations of the Federal Environmental Protection Agency and the Federal Department of Transportation. | | | | | |
| Generator Certification <u>[Signature]</u> | | Printed Name <u>LEWIS MASLOW</u> | | Date Shipped <u>7/30/86</u> | |
| TRANSPORTER | | EPA IDENTIFICATION CODE NO. <u>PAD085690592</u> | | | |
| COMPANY <u>WASTE CONVERSION INC.</u> | | ADDRESS <u>2869 SANDSTONE DRIVE</u> | | | |
| CITY <u>HATFIELD</u> | | STATE <u>PA</u> | | ZIP <u>19440</u> | PHONE <u>215-822-8996</u> |
| This is to certify acceptance of the above described waste for transportation. | | | | | |
| SIGNATURE <u>John Frederick</u> | | PRINT NAME <u>JOHN FREDERICK</u> | | DATE <u>7-30-86</u> | |
| TRACTOR <u>W.C.-20</u> | | TRAILER <u>T-950 WAX</u> | | DRIVER <u>John Frederick</u> | |
| DEPARTED <u>1:30</u> | | A.M. <input checked="" type="checkbox"/> P.M. <input checked="" type="checkbox"/> | | ARRIVE WASTE CONVERSION <u>2:42:3</u> | |
| ARRIVAL AT CUSTOMER <u>3:00</u> | | <input checked="" type="checkbox"/> | | TOTAL DELAY TIME <u>2 HRS</u> | |
| STARTED LOADING <u>3:30</u> | | <input checked="" type="checkbox"/> | | REASON FOR DELAY <u>SILL BEAN-UP</u> | |
| END LOADING <u>5:30</u> | | <input checked="" type="checkbox"/> | | AUTHORIZED SIGNATURE <u>[Signature]</u> | |
| DEPARTED CUSTOMER <u>6:00</u> | | <input checked="" type="checkbox"/> | | A.M. <input type="checkbox"/> P.M. <input type="checkbox"/> | |
| Net Weight: _____ (pounds) | | Gallons: _____ | | | |
| SpGr: _____ | | Unloaded To: _____ | | | |
| pH: _____ | | Unloaded By: _____ | | | |
| % Acid. as _____ | | Date Unloaded: _____ | | | |
| Other Tests: _____ | | Time Unloaded: _____ | | | |
| | | no _____ | | | |

Waste Conversion INC.

2869 Sandstone Drive / Hatfield, Penna. 19440

ORIGINAL
(Red)

| | | | | | |
|--|---|---|---|--|---------------|
| Manifest Number P 6800 Date 3/22/86
Received, subject to the classifications and tariffs in effect on the date of issue of this original Bill of Lading. | | STRAIGHT
BILL OF LADING
NON NEGOTIABLE | | COMMONWEALTH OF PENNSYLVANIA
DEPT. OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
PROCESSING FACILITY
PERMIT NO. 300694 | |
| <small>The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as show below, which said company (the word company being understood through this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes, or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.</small> | | | | | |
| DATE OF PICKUP 3/22/86 | | EPA IDENTIFICATION CODE NO. PAD044545895 | | | |
| GENERATOR Metro container Corproation | | ADDRESS 2nd and Price Streets | | | |
| CITY Trainer | | STATE PA | | ZIP 19016 PHONE 215 485 6100 | |
| CONSIGNEE/TREATMENT/STORAGE/DISPOSAL FACILITY | | EPA IDENTIFICATION CODE NO. PAD085690592 | | | |
| CONSIGNEED TO Waste Conversion, Inc | | ADDRESS 2869 Sandstone Drive | | | |
| CITY Hatfield | | STATE PA | | ZIP 19440 PHONE 215 822 8996 | |
| THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT STORAGE DISPOSAL | | | | | |
| SIGNATURE _____ | | PRINT NAME _____ | | DATE _____ | |
| No. and Types Cont. | EPA Description or D.O.T. Shipping Name | | Hazard Class | | Weight Volume |
| 1 T/T | Waste Pit Sludge
Sludge from Drum Washings | | Non Regulated Material | | 5000
891 |
| SPECIAL HANDLING INSTRUCTIONS/COMMENTS
NOT A HAZARDOUS WASTE PER SUB PART C D PART 261, 40 CFR | | | PLACARDS PROVIDED/AFFIXED
Drive Safely 2.0000 x | | |
| Lab Code No. 2905 | | | DRIVERS SIGNATURE | | |
| EMERGENCY INFORMATION!!!
Call Generator, (print) Metro Container Corp | | | CALL CHEMTREX 800-424-9300
Phone No. A/C 215 485 6100 | | |
| I certify that the materials described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported in commerce under the applicable regulations of the Federal Environmental Protection Agency and the Federal Department of Transportation. | | | | | |
| Generator Certification | | | Printed Name STEVE ZUBRIN Date Shipped 3-22-86 | | |
| TRANSPORTER
COMPANY Waste Conversion Inc | | EPA IDENTIFICATION CODE NO. PAD085690592 | | | |
| CITY Hatfield | | ADDRESS 2869 Sandstone Drive | | | |
| STATE PA | | ZIP 19440 PHONE 215 822 8996 | | | |
| This is to certify acceptance of the above described waste for transportation. | | | | | |
| SIGNATURE | | PRINT NAME Michael R Dado | | DATE 3/22/86 | |
| TRACTOR Waste Conversion Inc | | TRAILER #950 VAC | | DRIVER | |
| DEPARTED _____ | | ARRIVE WASTE CONVERSION _____ | | TOTAL DELAY TIME 3 hrs 5 min | |
| ARRIVAL AT CUSTOMER _____ | | REASON FOR DELAY Sludg To Thick | | AUTHORIZED SIGNATURE | |
| STARTED LOADING _____ | | UNLOADED TO: _____ | | UNLOADED BY: _____ | |
| END LOADING _____ | | DATE UNLOADED: _____ | | TIME UNLOADED: _____ | |
| DEPARTED CUSTOMER _____ | | no | | | |
| Net Weight: _____ (pounds) | | | | | |
| SpGr: _____ | | | | | |
| pH: _____ | | | | | |
| % Acid, as _____ | | | | | |
| Other Tests: _____ | | | | | |

Waste Conversion INC.

2869 Sandstone Drive / Hatfield, Penna. 19440

ORIGINAL
(Red)

| | | | | | |
|--|--|---|---|--|--|
| Manifest N^o 18989 Date <u>3/22/86</u>
Received, subject to the classifications and tariffs in effect on the date of issue of this original Bill of Lading. | | STRAIGHT
BILL OF LADING
NON NEGOTIABLE | | COMMONWEALTH OF PENNSYLVANIA
DEPT. OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
PROCESSING FACILITY
PERMIT NO. 300694 | |
| <small>The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as show below, which said company (the word company being understood through this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes, or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.</small> | | | | | |
| DATE OF PICKUP _____ | | EPA IDENTIFICATION CODE NO. <u>PAD044545895</u> | | | |
| GENERATOR <u>Metro Container Corporation</u> | | ADDRESS <u>2nd and Price Streets</u> | | | |
| CITY <u>Trainer</u> | | STATE <u>PA</u> ZIP <u>19016</u> | | PHONE <u>215 485 6100</u> | |
| CONSIGNEE/TREATMENT/STORAGE/DISPOSAL FACILITY | | EPA IDENTIFICATION CODE NO. <u>PAD085690592</u> | | | |
| CONSIGNED TO <u>WASTE CONVERSION INC.</u> | | ADDRESS <u>2869 SANDSTONE DRIVE</u> | | | |
| CITY <u>HATFIELD</u> STATE <u>PA</u> ZIP <u>19440</u> | | PHONE <u>215-822-8996</u> | | | |
| THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT STORAGE DISPOSAL | | | | | |
| SIGNATURE _____ | | PRINT NAME _____ | | DATE _____ | |
| No. and Types Cont. | | EPA Description or D.O.T. Shipping Name | | Hazard Class | |
| 1 T/T | | Waste Pit Sludge
Sludge from Drum Washings | | Non Regulated Material | |
| | | | | Weight Volume <u>5000G</u> | |
| SPECIAL HANDLING INSTRUCTIONS/COMMENTS
<u>NOT A HAZARDOUS WASTE PER SUB PART C D PART 261, 40 CFR</u> | | | Lab Code No. <u>2905</u> | | |
| | | | PLACARDS PROVIDED/AFFIXED
1. <u>Drive Safely</u>
2. <u>0000</u> | | |
| | | | DRIVERS SIGNATURE <u>Joseph J. Senter</u> | | |
| EMERGENCY INFORMATION!!! | | | CALL: CHEMTREX 800-424-9300 | | |
| Call Generator, (print) <u>Metro Container Corp</u> | | | Phone No. A/C <u>215 485 6100</u> | | |
| I certify that the materials described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported in commerce under the applicable regulations of the Federal Environmental Protection Agency and the Federal Department of Transportation. | | | | | |
| Generator Certification <u>Steve Zubrin</u> Printed Name <u>STEVE ZUBRIN</u> Date Shipped <u>3-22-86</u> | | | | | |
| TRANSPORTER | | EPA IDENTIFICATION CODE NO. <u>PAD085690592</u> | | | |
| COMPANY <u>WASTE CONVERSION INC.</u> | | ADDRESS <u>2869 SANDSTONE DRIVE</u> | | | |
| CITY <u>HATFIELD</u> STATE <u>PA</u> ZIP <u>19440</u> | | PHONE <u>215-822-8996</u> | | | |
| This is to certify acceptance of the above described waste for transportation. | | | | | |
| SIGNATURE <u>Joseph J. Senter</u> | | PRINT NAME <u>JOSEPH J. SENTER</u> | | DATE <u>3-22-86</u> | |
| TRACTOR <u>17</u> | | TRAILER <u>1174</u> | | DRIVER <u>Joseph J. Senter</u> | |
| DEPARTED _____ | | ARRIVE WASTE CONVERSION _____ | | TOTAL DELAY TIME <u>30 min. HRS</u> | |
| ARRIVAL AT CUSTOMER _____ | | REASON FOR DELAY <u>TOO THICK TO PUMP</u> | | AUTHORIZED SIGNATURE <u>Steve Zubrin</u> | |
| STARTED LOADING _____ | | | | | |
| END LOADING _____ | | | | | |
| DEPARTED CUSTOMER _____ | | | | | |
| Net Weight: _____ (pounds) | | Gallons: _____ | | Unloaded To: _____ | |
| SpGr: _____ | | Unloaded By: _____ | | Date Unloaded: _____ | |
| pH: _____ | | Time Unloaded: _____ | | no | |
| % Acid, as _____ | | | | | |
| Other Tests: _____ | | | | | |

White-GENERATOR FILE
Blue-TRANSPORTER FILE
Green-PROCESSING FACILITY
Yellow-RETURN TO GENERATOR

Pink-DEPT. ENVIRONMENTAL RESOURCES
White-HATFIELD TWP. SEWER AUTHORITY
White-PROCESSING FACILITY

Waste Conversion

INC.

2869 Sandstone Drive / Hatfield, Penna. 19440

ORIGINAL
(Red)Est. No. **16621** Date **7-22-85**

Received, subject to the classifications and tariffs in effect on the date of issue of this original Bill of Lading.

STRAIGHT
BILL OF LADING
NON NEGOTIABLECOMMONWEALTH OF PENNSYLVANIA
DEPT. OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
PROCESSING FACILITY
PERMIT NO. 300694

The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as shown below, which said company (the word company being understood through this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes, or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

DATE OF PICKUP **7-22-85** EPA IDENTIFICATION CODE NO. **PAD044545895**
GENERATOR **Metro Container Corporation** ADDRESS **2nd & Price Streets**
CITY **Trainer** STATE **Pa** ZIP **19016** PHONE **215-485-6100**CONSIGNEE/TREATMENT/STORAGE/DISPOSAL FACILITY EPA IDENTIFICATION CODE NO. **PAD085690592**
CONSIGNED TO **WASTE CONVERSION INC.** ADDRESS **2869 SANDSTONE DRIVE**
CITY **HATFIELD** STATE **PA** ZIP **19440** PHONE **215-822-8996**

THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT STORAGE DISPOSAL

SIGNATURE _____ PRINT NAME _____ DATE _____

| No. and Types Cont | EPA Description or D.O.T. Shipping Name | Hazard Class | Weight Volume |
|--------------------|---|------------------------|---------------|
| 1 T/T | Waste Pit Sludge
Sludge from Drum Washings | Non Regulated Material | 5000
Cm |

SPECIAL HANDLING INSTRUCTIONS/COMMENTS

NOT A HAZARDOUS WASTE PER SUB
PART C, D, PART 261, 40 CFRLab Code No. **2905**

PLACARDS PROVIDED/AFFIXED

1. **Drive Safely** DRIVERS SIGNATURE
2. **0000** X _____

EMERGENCY INFORMATION!!!

CALL: CHEMTREX 800-424-9300

Call Generator, (print) **Metro Container Corporation** Phone No. A/C **215-485-6100**

I certify that the materials described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported in commerce under the applicable regulations of the Federal Environmental Protection Agency and the Federal Department of Transportation.

Generator Certification **Norman Trachun** Printed Name **Norman Trachun** Date Shipped **07/22/85**

TRANSPORTER

EPA IDENTIFICATION CODE NO. **PAD085690592**COMPANY **WASTE CONVERSION INC.** ADDRESS **2869 SANDSTONE DRIVE**
CITY **HATFIELD** STATE **PA** ZIP **19440** PHONE **215-822-8996**

This is to certify acceptance of the above described waste for transportation.

SIGNATURE **John Frederick** PRINT NAME **JOHN FREDERICK** DATE **7-22-85**TRACTOR **W.C.-20** TRAILER **850** DRIVER **John Frederick**

| | A.M. | P.M. |
|---------------------|-------------|-------------------------------------|
| DEPARTED | 6:00 | <input checked="" type="checkbox"/> |
| ARRIVAL AT CUSTOMER | 7:45 | <input checked="" type="checkbox"/> |
| STARTED LOADING | 8:00 | <input checked="" type="checkbox"/> |
| END LOADING | 8:30 | <input checked="" type="checkbox"/> |
| DEPARTED CUSTOMER | 8:45 | <input checked="" type="checkbox"/> |

ARRIVE WASTE CONVERSION

TOTAL DELAY TIME _____

REASON FOR DELAY _____

AUTHORIZED SIGNATURE _____

Net Weight: _____ (pounds)

SpGr: _____

pH: _____

% Acid, as _____

Other Tests: _____

Gallons: _____

Unloaded To: _____

Unloaded By: _____

Date Unloaded: _____

Time Unloaded: _____

no

Waste Conversion INC.

2869 Sandstone Drive / Hatfield, Penna. 19440

ORIGINAL
(Red)

| | | | |
|---|--|--|---|
| Manifest No 18617 Date _____ | | STRAIGHT
BILL OF LADING
NON NEGOTIABLE | COMMONWEALTH OF PENNSYLVANIA
DEPT. OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
PROCESSING FACILITY
PERMIT NO. 300694 |
| Received, subject to the classifications and tariffs in effect on the date of issue of this original Bill of Lading. | | | |
| The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as show below, which said company (the word company being understood through this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes, or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns. | | | |
| DATE OF PICKUP _____ | | EPA IDENTIFICATION CODE NO. PAD044545895 | |
| GENERATOR Metro Container Corporation | | ADDRESS 2nd and Price Street | |
| CITY Trainer | | STATE PA ZIP 19016 PHONE 215 485 6100 | |
| CONSIGNEE/TREATMENT/STORAGE/DISPOSAL FACILITY | | EPA IDENTIFICATION CODE NO. PAD085690592 | |
| CONSIGNED TO WASTE CONVERSION INC. | | ADDRESS 2869 SANDSTONE DRIVE | |
| CITY HATFIELD | | STATE PA ZIP 19440 PHONE 215-822-8996 | |
| THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT STORAGE DISPOSAL | | | |
| SIGNATURE _____ | | PRINT NAME _____ DATE _____ | |
| No. and Types Cont. | EPA Description or D.O.T. Shipping Name | Hazard Class | Weight Volume |
| 1 T/T | Waste Pit Sludge
Sludge from Drum Washings. | Non Regulated Material | 5500
A |
| SPECIAL HANDLING INSTRUCTIONS/COMMENTS
NOT A HAZARDOUS WASTE PER SUB PART C D PART 261, 40 CFR | | PLACARDS PROVIDED/AFFIXED
1. Drive Safely
2. 0000 | |
| Lab Code No. 2905 | | DRIVERS SIGNATURE <i>[Signature]</i> | |
| EMERGENCY INFORMATION!!! | | CALL: CHEMTREK 800-424-9300 | |
| Call Generator, (print) Metro Container Corporation | | Phone No. A/C 215 485 6100 | |
| I certify that the materials described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported in commerce under the applicable regulations of the Federal Environmental Protection Agency and the Federal Department of Transportation. | | | |
| Generator Certification <i>[Signature]</i> | | Printed Name <i>[Signature]</i> Date Shipped <i>[Date]</i> | |
| TRANSPORTER | | EPA IDENTIFICATION CODE NO. PAD085690592 | |
| COMPANY WASTE CONVERSION INC. | | ADDRESS 2869 SANDSTONE DRIVE | |
| CITY HATFIELD | | STATE PA ZIP 19440 PHONE 215-822-8996 | |
| This is to certify acceptance of the above described waste for transportation. | | | |
| SIGNATURE <i>[Signature]</i> | | PRINT NAME <i>[Signature]</i> DATE <i>[Date]</i> | |
| TRACTOR _____ | TRAILER _____ | DRIVER _____ | |
| DEPARTED _____ | | ARRIVE WASTE CONVERSION | |
| ARRIVAL AT CUSTOMER _____ | | TOTAL DELAY TIME _____ | |
| STARTED LOADING _____ | | REASON FOR DELAY <i>[Signature]</i> | |
| END LOADING _____ | | AUTHORIZED SIGNATURE <i>[Signature]</i> | |
| DEPARTED CUSTOMER _____ | | DATE <i>[Date]</i> | |
| Net Weight: _____ (pounds) | Gallons: _____ | Unloaded To: _____ | |
| SpGr: _____ | Unloaded By: _____ | Date Unloaded: _____ | |
| pH: _____ | Time Unloaded: _____ | no _____ | |
| % Acid, as _____ | | | |
| Other Tests: _____ | | | |

Waste Conversion

INC.

2869 Sandstone Drive / Hatfield, Penna. 19440

ORIGINAL
(Reg)
17800

| | | | | | |
|--|---|--|--|--|--|
| Manifest Number Nº 17441 Date 9-30-85
Received, subject to the classifications and tariffs in effect on the date of issue of this original Bill of Lading. | | STRAIGHT
BILL OF LADING
NON NEGOTIABLE | | COMMONWEALTH OF PENNSYLVANIA
DEPT. OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
PROCESSING FACILITY
PERMIT NO. 300694 | |
| <small>The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as show below, which said company (the word company being understood through this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes, or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.</small> | | | | | |
| DATE OF PICKUP 9-30-85 | | EPA IDENTIFICATION CODE NO. PAD044545895 | | | |
| GENERATOR Metro Container Corporation | | ADDRESS 2nd & Price Streets | | | |
| CITY Trainer | | STATE Pa | | ZIP 19016 PHONE 215 485 6100 | |
| CONSIGNEE/TREATMENT/STORAGE/DISPOSAL FACILITY | | EPA IDENTIFICATION CODE NO. PAD085690592 | | | |
| CONSIGNED TO WASTE CONVERSION INC. | | ADDRESS 2869 SANDSTONE DRIVE | | | |
| CITY HATFIELD | | STATE PA | | ZIP 19440 PHONE 215-822-8996 | |
| THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT STORAGE DISPOSAL | | | | | |
| SIGNATURE _____ | | PRINT NAME _____ | | DATE _____ | |
| No. and Types Cont. | E.P.A. Description or D.O.T. Shipping Name | | Hazard Class | Weight Volume | |
| 1 T/T | Waste Pit Sludge
Sludge from Drum Washings | | Non Regulated Material | 5500
C. | |
| SPECIAL HANDLING INSTRUCTIONS/COMMENTS
NOT A HAZARDOUS WASTE PER SUB PART C, D, PART 261, 40 CFR | | | PLACARDS PROVIDED/AFFIXED
1 Drive Safely
2 0000 | | |
| Lab Code No. 2905 | | | DRIVER'S SIGNATURE <i>John Frederick</i> | | |
| EMERGENCY INFORMATION!!!
Call Generator, (print) Metro Container Corporation | | | CALL: CHEMTREX 800-424-9300
Phone No. A/C 215 485 6100 | | |
| I certify that the materials described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported in commerce under the applicable regulations of the Federal Environmental Protection Agency and the Federal Department of Transportation. | | | | | |
| Generator Certification <i>John J. Warner</i> Printed Name JOHN J. WARNER Date Shipped 9-30-85 | | | | | |
| TRANSPORTER | | EPA IDENTIFICATION CODE NO. PAD085690592 | | | |
| COMPANY WASTE CONVERSION INC. | | ADDRESS 2869 SANDSTONE DRIVE | | | |
| CITY HATFIELD | | STATE PA ZIP 19440 PHONE 215-822-8996 | | | |
| This is to certify acceptance of the above described waste for transportation. | | | | | |
| SIGNATURE <i>John Frederick</i> | | PRINT NAME JOHN FREDERICK | | DATE 9-30-85 | |
| TRACTOR W.C.-20 | | TRAILER 1450 JAC | | DRIVER <i>John Frederick</i> | |
| DEPARTED 11:30 | | AM. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> | | ARRIVE WASTE CONVERSION <input type="checkbox"/> AM. <input type="checkbox"/> P.M. <input type="checkbox"/> | |
| ARRIVAL AT CUSTOMER 1:00 | | <input type="checkbox"/> AM. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> | | TOTAL DELAY TIME _____ | |
| STARTED LOADING 1:25 | | <input type="checkbox"/> AM. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> | | REASON FOR DELAY _____ | |
| END LOADING 1:45 | | <input type="checkbox"/> AM. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> | | AUTHORIZED SIGNATURE _____ | |
| DEPARTED CUSTOMER 2:00 | | <input type="checkbox"/> AM. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> | | Gallons: _____ | |
| Net Weight: _____ (pounds) | | Unloaded To: _____ | | | |
| SpGr: _____ | | Unloaded By: _____ | | | |
| pH: _____ | | Date Unloaded: _____ | | | |
| % Acid, as _____ | | Time Unloaded: _____ | | | |
| Other Tests: _____ | | no | | | |

White-GENERATOR FILE

Pink-DEPT. ENVIRONMENTAL RESOURCES

Waste Conversion

INC.

2869 Sandstone Drive / Hatfield, Penna. 19440

ORIGINAL
(Red)

| | | | | | |
|--|---|---|---|--|--|
| Manifest Nº 15209 Date <u>5-8-85</u>
Received, subject to the classifications and tariffs in effect on the date of issue of this original Bill of Lading. | | STRAIGHT
BILL OF LADING
NON NEGOTIABLE | | COMMONWEALTH OF PENNSYLVANIA
DEPT. OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT
PROCESSING FACILITY
PERMIT NO. 300694 | |
| <small>The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as show below, which said company (the word company being understood through this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes, or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.</small> | | | | | |
| DATE OF PICKUP <u>5-8-85</u> EPA IDENTIFICATION CODE NO. <u>PAD044545895</u> | | GENERATOR <u>Metro Container Corporation</u> ADDRESS <u>2nd & Price Streets</u> | | | |
| CITY <u>Trainer</u> STATE <u>PA</u> ZIP <u>19016</u> PHONE <u>215-485-6100</u> | | | | | |
| CONSIGNEE/TREATMENT/STORAGE/DISPOSAL FACILITY EPA IDENTIFICATION CODE NO. <u>PAD085690592</u> | | CONSIGNEE TO <u>WASTE CONVERSION INC.</u> ADDRESS <u>2869 SANDSTONE DRIVE</u> | | | |
| CITY <u>HATFIELD</u> STATE <u>PA</u> ZIP <u>19440</u> PHONE <u>215-822-8996</u> | | | | | |
| THIS IS TO CERTIFY THE ACCEPTANCE OF THIS WASTE FOR TREATMENT STORAGE DISPOSAL | | | | | |
| SIGNATURE _____ | | PRINT NAME _____ | | DATE _____ | |
| No. and Types Cont. | EPA Description or D.O.T. Shipping Name | | Hazard Class | Weight Volume | |
| 1 T/T | Waste Pit Sludge
Sludge from Drum Washings | | Non Regulated Material | 5000
GAL | |
| SPECIAL HANDLING INSTRUCTIONS/COMMENTS
NOT A HAZARDOUS WASTE PER SUB
PART C, D, PART 261, 40 CFR
Lab Code No. <u>2905</u> | | | PLACARDS PROVIDED/AFFIXED | | |
| | | | 1. <u>Drive Safely</u> DRIVER'S SIGNATURE <u>John Frederick</u>
2. <u>0000</u> | | |
| EMERGENCY INFORMATION!!! | | | CALL CHEMTREX 800-424-9300 | | |
| Call Generator, (print) <u>Metro Container Corporation</u> | | | Phone No. A/C <u>215-485-6100</u> | | |
| I certify that the materials described above are properly described, classified, packaged, marked and labeled and are in proper condition to be transported in commerce under the applicable regulations of the Federal Environmental Protection Agency and the Federal Department of Transportation. | | | | | |
| Generator Certification <u>Jackie Warner</u> | | Printed Name <u>JACKIE WARNER</u> | | Date Shipped <u>5-8-85</u> | |
| TRANSPORTER | | EPA IDENTIFICATION CODE NO. <u>PAD085690592</u> | | | |
| COMPANY <u>WASTE CONVERSION INC.</u> | | ADDRESS <u>2869 SANDSTONE DRIVE</u> | | | |
| CITY <u>HATFIELD</u> STATE <u>PA</u> ZIP <u>19440</u> | | PHONE <u>215-822-8996</u> | | | |
| This is to certify acceptance of the above described waste for transportation. | | | | | |
| SIGNATURE <u>John Frederick</u> | | PRINT NAME <u>JOHN FREDERICK</u> | | DATE <u>5-8-85</u> | |
| TRACTOR <u>W.C.-20</u> | | TRAILER <u>250 VIK</u> | | DRIVER <u>John Frederick</u> | |
| DEPARTED <u>5:30</u> | | AM. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> | | ARRIVE WASTE CONVERSION | |
| ARRIVAL AT CUSTOMER <u>7:00</u> | | AM. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> | | TOTAL DELAY TIME <u>3/4 hr</u> | |
| STARTED LOADING <u>7:15</u> | | AM. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> | | REASON FOR DELAY <u>THICK</u> | |
| END LOADING <u>8:30</u> | | AM. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> | | AUTHORIZED SIGNATURE <u>Jackie Warner</u> | |
| DEPARTED CUSTOMER <u>8:45</u> | | AM. <input checked="" type="checkbox"/> P.M. <input type="checkbox"/> | | | |
| Net Weight: _____ (pounds) | | Gallons: _____ | | Unloaded To: _____ | |
| SpGr: _____ | | Unloaded By: _____ | | Date Unloaded: _____ | |
| pH: _____ | | Time Unloaded: _____ | | | |
| % Acid, as _____ | | | | | |
| Other Tests: _____ | | | | | |

White-GENERATOR FILE

Pink-DEPT. ENVIRONMENTAL RESOURC.

From: Metro Container

Carrier

Shipper's No. 4

Carrier's No.

ORIGINAL
(Red)

RECEIVE, subject to the classifications and tariffs in effect on the date of the issue of this Shipping Order,

at Trainer, Pa. 19 from 1/6/86

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time (intermediate in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to National Waste Disposal

(Mail or street address of consignee—For purposes of notification only.)

Destination Trenton, N.J. State N.J. County Delivery Address Trenton, N.J.
(*To be filled in only when shipper desires and governing tariffs provide for delivery thereof.)Route

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Column | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. |
|--------------|---|-----------------------|---------------|--------------|---|
| 20 | Yard Container | | | | (Signature of Consignor.)
If charges are to be prepaid, write or stamp here, "To Be Prepaid." |
| | Non Hazardous | | | | |
| | Sludge Container | | | | Received by _____ to apply in prepayment of the charges on the property described herein. |
| | ID No. NJD096839154 | | | | |
| | | | | | Agent or Cashier
Per _____
(The signature here acknowledges only the amount prepaid.)
Charges Advanced:
\$ |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____

*The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

*Shipper's imprint in lieu of stamp: not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per [Signature]

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

2

Permanent post-office address of shipper.

65696 Rediforme

POLY PAK (50 SETS) 6P696

From: **Metro Container**

Carrier

Shipper's No.

Carrier's No.

EXCEPT, subject to the classifications and tariffs in effect on the date of the issue of this Shipping Order.

at **Trainer, Pa.** **19** from **11/21/85**

the property described below, in apparent good order, except as noted hereon and conditions of carriage of packages unknown, received, assigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only.)

Destination _____ State _____ County _____

Delivery Address ★ **Trenton, N.J.**
(*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Article, Special Marks, and Exceptions | Weight (Lbs. to Car.) | Class or Rate | Check Columns | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of the shipment without payment of freight and all other lawful charges. |
|--------------|--|-----------------------|---------------|---------------|--|
| 20 | Yard container | | | | (Signature of Consignor.)

If charges are to be prepaid, write or stamp here, "To Be Prepaid." |
| | Non Hazardous | | | | |
| | Sludge Container | | | | |
| | | | | | Received by _____ to apply in prepayment of the charges on the property described hereon. |
| | | | | | |
| | | | | | |
| | | | | | Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)
Charges Advanced: _____ |
| | | | | | |
| | | | | | |

If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

Value agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per _____

Agent must attach and retain this Shipping Order and must sign the Original Bill of Lading.

2

nearest post-office address of shipper.

S696 Rediforme

OLY PAK (50 SETS) 6P696

ALL SPILLS MUST BE REPORTED TO THE MICHIGAN POLLUTION EMERGENCY CENTER AT 1-800-424-9802 24 HOURS PER DAY.

TRANSPORTER RECEIPT

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, including applicable state regulations.

Printed/Typed Name

Sydney Levy

Signature

Date

Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Date

Month Day Year

DNR
MICHIGAN DEPARTMENT
OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE

ATT. ☐ DIS. ☐ REJ. ☐

1978, as amended and Act 136, PA 1969.
Failure to file is punishable under section 230.548 MCL or Section 10 of Act 136, PA. 1969.

Please print or type.

Form Approved OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest
Document No.

2. Page 1
of

Information in the shaded areas
is not required by Federal
law.

3. Generator's Name and Mailing Address

Hetro Container
2nd & Pines ST., Trainer PA 19013

A. State Manifest Document Number

MI 0671222

4. Generator's Phone ()

B. State Generator's ID

5. Transporter 1 Company Name
National Waste Disposal Inc.

6. US EPA ID Number

C. State Transporter's ID

7. Transporter 2 Company Name

8. US EPA ID Number

D. Transporter's Phone

9. Designated Facility Name and Site Address

Michigan Disposal, Inc.
49356 N. Service Pa.
Bellefonte, Michigan 48811

10. US EPA ID Number

MI D000724831

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and
HM ID NUMBER).

12. Containers

13. Total
Quantity

14. Unit
Wt/Vol

15. Waste
No. NM

a. **Non-Hazardous Nonregulated Sludge**

No. Type

20 Yd.

8292

51943

b. **51943**

c.

d.

16. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes
Listed Above

a/ 1

b/ 1

c/ 1

d/ 1

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name

Sydney Levy

Signature

Date

Month Day Year

11/18/85

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

JEROME HILTON

Signature

[Signature]

Date

Month Day Year

11/21/85

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name

Signature

Date

Month Day Year

19. Discrepancy Indication Space

[Handwritten notes and signatures]

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

REINHOLD

Signature

[Signature]

Date

Month Day Year

11/25/85

Center at 1-800-424-8802 24 HOURS PER DAY.

TRANS-PORTER

RECEIVED

This Memorandum

is an acknowledgment that a bill of lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property shown herein, and is intended solely for filing or record.

From: **Metco Container**

Carrier

Shipper's No.

Carrier's No.

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trainer, Pa.** 19 from **9/18/85**

The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which and carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable applicable carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to: **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only.)

Destination _____ State _____ County _____

Delivery Address ★ **Trenton, N.J.**

(★ To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Columns | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignee shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignee)

If charges are to be prepaid, write or stamp here: "To Be Prepaid."

Received \$ _____ to apply in payment of the charges on the property described herein.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)
Charges Advanced \$ _____ |
|--------------|---|-----------------------|---------------|---------------|--|
| 20 | Yard container | | | | |
| | Non Hazardous | | | | |
| | Sludge Container | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

National Waste Shipper, Per *[Signature]*

Agent, Per _____

3

Permanence post-office address of shipper.

6 Rediforme

POLY PAK (50 SETS) 6P096

ORIGINAL
(Red)

Shipper's No.

Carrier's No.

The property described below, as apparent from bill of lading or other documents and conditions of packages intervenient, parcel, consigned and destined as indicated below, which said carrier (the vessel carrier being understood throughout the contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on all routes, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time intervening in all or any of said property, that every carrier to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Through Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment; or (2) in the applicable water carrier classification or tariff if this is a water carrier shipment.

Shipper hereby certifies that it is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

(Mail or street address of consignee—for purposes of notification only.)

Delivery Address ★ REVISION, N.J.
(★ To be filled in only when shipper desires and governing tariffs provide for delivery thereof.)

...the contract and governing terms provide for delivery thereof.)

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Columns | No. |
|--------------|---|-----------------------|---------------|---------------|---|
| 20 | YARD CONTAINER
NON HAZARDOUS
SLUDGE CONTAINER | | | | <p>Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:</p> <p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p>(Signature of Consignor.)</p> <p>If charges are to be prepaid, write or stamp here: "To Be Prepaid."</p> <p>Received \$_____ to apply in prepayment of the charges on the property described herein.</p> <p>Agent or Cashier</p> <p>For _____
(The signature here acknowledges only the amount prepaid.)</p> <p>Charges Advanced:</p> |
| 10 | #PAD 044545895 | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____

The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and the requirements of Uniform Freight Classification.

shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per.

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

current post-office address of shipper.

696 Rediforme

LY PAK (50 SETS) 6P4R6

2

This Memorandum is an acknowledgment that a bill of lading has been received, covering the property named herein, and is intended solely for filing or record.

ORIGINAL
(Recd)

Shipper's No.

Carrier

Carrier's No.

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

2nd & Price Sts.

at April 20,

19 87

from Metro Container Corp.

Trainer, PA 19016

the property described herein, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract to mean any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a non-rail shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to

City South Land Fill

(Mail or street address of consignee—For purposes of notification only)

Destination

46805 Willow Road,

Sunter,

State

Michigan

County USA

Delivery Address *

(*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Columns | Subject to Section 7 of Conditions of application of lading, if this shipment is to be delivered to consignee without recourse on the consignor, consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other charges. |
|--------------|---|-----------------------|---------------|---------------|--|
| 1 | Container of non-hazardous solid furnace ash.
CDS / MCD 1613
EPA # - MID 020850442
Metro's EPA # - PAD 04 454 5895 | | | | (Signature of Consignor)
If charges are to be prepaid, write or sign here: "To Be Prepaid." |
| | | | | | Received by _____ to app. prepayment of the charges on the property described herein. |
| | | | | | Agent or Cashier |
| | | | | | Per _____
(The signature here acknowledges only the amount prepaid.)
Charges Advanced:
\$ |

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.
‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per

Agent, Per

Permanent post-office address of shipper.

65696 Rediforme

POLY PAK (50 SETS) 6P696



State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2000-0404. Expires 7-31-86

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

2. Part 1

Information in the shaded areas
is not required by Federal law.

3. Generator's Name and Mailing Address

A. State Manifest
Document Number

NJA0208541

B. State Gen. ID

C. State Transporter 1 ID

D. Transporter's Phone

E. State Transporter 2 ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

4. Generator's City

5. Transporter

7. Transporter

9. Designated Facility Name and Site Address

10. Additional Descriptive Data Materials Listed Above

K. Handling codes for Waste Listed Above

GENERATOR'S CERTIFICATION

I hereby declare that the contents of this manifest are true and correct, and that the waste is properly classified, packaged, labeled, and stored in proper condition for transport.

I further declare that the waste is being transported to a facility that is licensed to receive and manage this waste, and that the waste is being transported in accordance with the requirements of the Resource Conservation and Recovery Act (RCRA) and the Hazardous Waste Manifest Regulations.

IN CASE OF AN EMERGENCY OR SPILL IMMEDIATELY CALL THE STATE THE EMERGENCY OCCURRED IN AND THE N.J. DEPT. OF ENVIRONMENTAL PROTECTION. (609) 292-5560 (Day) (609) 292-7172 (Night)

FACILITY

ORIGINAL

Shipper's No.

Carrier

Carrier's No.

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading **2nd & Price Sts.**

at **April 15, 19 87** from **Metco Container Corp. Trainer, PA 19014**

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Through Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **City South Land Fill**

(Mail or street address of consignee—for purposes of notification only.)

Destination **46805 Willow Road, Sumter, Michigan** County **USA**

Delivery Address *****
 (*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

| No. Packages | Kind of Package, Description of Article, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Column | No. |
|--------------|--|-----------------------|---------------|--------------|---|
| | | | | | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. |
| 1 | Container of non-hazardous solid furnace ash.
CDS / NCD 1613
EPA # - MID 020850442 | | | | (Signature of Consignor)
If charges are to be prepaid, write or stamp here: "To Be Prepaid." |
| | | | | | Received by _____ to apply in payment of the charges on the property described herein. |
| | | | | | Agent or Cashier |
| | | | | | Per _____
(The signers here acknowledges only the amount prepaid.) |
| | | | | | Charges Advanced:
\$ |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____
†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.
‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per

Agent, Per

4

Permanent post-office address of shipper.

6S696 Rediforme

POLY PAK (50 SETS) 6P696

This Shipping Order

Carbon, and retained by the Agent.

ORIGINAL

From: **Metro Container Corp.**

Carrier

Shipper's No.

Carrier's No.

RECEIVE, subject to the classifications and tariffs in effect on the date of this Shipping Order,

at **Trainer, Pa.** 19 from **2/25/87**

the property described below, in apparent good order, except as noted (nature and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the said carrier being understood throughout this contract as meaning any person or corporation in possession of this property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only.)

Destination _____ State _____ County _____

Delivery Address ★ **Trenton, New Jersey**

(★ To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Lbs. to Car.) | Class or Rate | Check Columns | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. |
|--------------|---|-----------------------|---------------|---------------|---|
| 20 | Yard Container, | | | | (Signature of Consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid." |
| | Sludge Container | | | | |
| | ID NO. NJDO96839154 | | | | |
| | Metro Container Corp. | | | | |
| | ID PADO4 454 5895 | | | | Received by _____ to apply in payment of the charges on the property described herein. |
| | | | | | |
| | | | | | |
| | | | | | |

If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

Shipper's imprint in lieu of stamp: not a part of bill of lading approved by the Interstate Commerce Commission.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced:

\$

Shipper, Per

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

Permanent post-office address of shipper.

65696 Rediform®

POLY PAK (50 SETS) 6P696

Shipper's No.

Carrier's No.

From: **Metro Container Corp.**

Carrier

ORIGINAL
(Red)

RESERVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trainer, Pa.** **19** from **1/5/87**

The property described below, in apparent good order, except as noted hereon and condition of contents of packages (contents, marked, consigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery of said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, on to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only.)

Destination **Trenton, New Jersey** State **New Jersey** County **Union**

Delivery Address **Trenton, New Jersey**
(*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Check Columns | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. |
|--------------|---|------------------------|---------------|---------------|---|
| 20 | Yard Container, | | | | (Signature of Consignor)
If charges are to be prepaid, write or stamp here, "To Be Prepaid." |
| | Sludge Container | | | | |
| | ID NO. NJD096839154 | | | | |
| | Metro Container Corp. | | | | |
| | ID PAD04 454 5895 | | | | Received by _____ to apply in payment of the charges on the property described herein. |
| | | | | | |
| | | | | | Agent or Cashier |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Per _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced:

\$

Shipper, Per _____

Agent, Per _____

Permanent post-office address of shipper.

65696 Redifprme

POLY PAK (50 SETS) 6P696

added. Time will be added.

4

This Shipping Order

Carbon, and retained by the Agent.

Support No. 7

ORIGINAL
(Red)

From: **Metro Container Corp.**

Carrier

Carrier's No.

Subject to the classifications and tariffs in effect on the date of the issue of this Shipping Order.

at **Trainer, PA** **19** from **11/24/86**

The property described below, in apparent good order, except as noted contents and condition of contents of packages unknown, marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if as its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each party of all or any of said property over all or any portion of said route to destination, and as to each party of any time interest in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only.)

Destination _____ State _____ County _____

Delivery Address ★ **Trenton, New Jersey**

(★ To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Class Column | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

Received \$ _____ to apply in prepayment of the charges on the property described hereon.

Agent or Carrier

Per _____
(The signature here acknowledges only the amount prepaid.)
Charges Advanced
\$ |
|--------------|---|------------------------|---------------|--------------|--|
| 20 | Yard Container, Non-Hazardous
Sludge Container
ID NO. NJD096839154 | | | | |

*If the shipment moves between two parts by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per *[Signature]*

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

Permanent post-office address of shipper.

65696 Rediforme

POLY PAK (50 SETS) 6P696

2

Carrier's No. _____

at Trainer, Pa. 19 from 6/25/86

Consigned to National Waste Disposal

(Mail or street address of consignee—For purposes of notification only.)

Destination _____ State _____ County _____

Delivery Address ★ **Trenton, N.J.**

(★ To be filled in only when shipper desires and governing tariffs provide for delivery thereof.)

Route

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Check Column | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. |
|--------------|---|------------------------|---------------|--------------|---|
| 20 | Yard Container, Non Hazardous | | | | |
| | Sludge Container | | | | |
| | ID No. NJD096839154 | | | | |
| | | | | | (Signature of Consignor.) |
| | | | | | If charges are to be prepaid, write or stamp here, "To Be Prepaid." |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | Received \$_____ to apply in payment of the charges on the property described herein. |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

DOI

f. "The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification."

†Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Agony or Content?

Per _____
(The signature here acknowledges only the amount
prepaid.)

Charges Advanced:

13

Shipper, Per.

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

Permanent post-office address of shipper.

65696 Rediform®

POLY PAK (50 SETS) 6P696

ORIGINAL
(REV)

From: **Metro Container Corp.**

Carrier

Shipper's No.

Carrier's No.

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trenton, Pa.** 19 from **5/13/86**

The property described below, in apparent good order, except as noted (contents and condition of packages unknown), marked, consigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout this document as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, on the part of each carrier of all or any of said property over all or any portion of said route to destination, and on the part of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only.)

Destination _____ State _____ County _____

Delivery Address ★ **Trenton, N.J.**

(*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Check Column | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor.)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

Received \$ _____ to apply in payment of the charges on the property described hereon.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced:
\$ _____ |
|--------------|---|------------------------|---------------|--------------|---|
| 20 | Yard Container, Non Hazardous | <i>PAID</i> | | | |
| | Sludge Container | | | | |
| | ID No. NJD096839154 | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per _____

Agent, Per _____

4

Permanent post-office address of shipper.

6S696 Rediforme

Available for
if not in

POLY PAK (50 SETS) 6P696

ORIGINAL
(Red)

from 7-16-66

The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, counted, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract or any other contract or agreement in connection with the transportation of the property described below) agrees to carry to its usual place of delivery of said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, and it is the responsibility of the shipper, to advise the carrier of any special instructions, and to each carrier of all or any of said property over all or any portion of said route to destination, and to each party of any transshipment or of any of said property, that they agree to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back hereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his consignee.

No.

Shipper, Per _____ Agent, Per _____
 Permanent post-office address of shipper.
65696 Rediforme
 POLY PAK (30 SETS) 65696

Shipper's No.

Carrier

Carrier's No.

ORIGINAL
(Red)

RECEIVE, subject to the classifications and tariffs in effect on the date of the issue of this Shipping Order.

at JAN 31 1986 from METRO CONTAINER
 the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, numbered, and delivered as indicated below, which said carrier (the vessel carrier being understood throughout the contract in meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Through Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date thereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.
 Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted by himself and his assigns.

Consigned to ADDITIONAL DISPOSAL FOR WAYNE DISPOSAL
 (Mail or street address of consignee—For purposes of notification only.)

Destination TRENTON, NJ. State BELLVILLE, MICHIGAN County

Delivery Address ★ BELLVILLE, MICHIGAN
 (★ To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

Delivering Carrier Car or Vehicle Initials No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Check Column | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of the shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

Received _____ To apply in prepayment of the charges on the property described herein.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)
Charges Advanced
\$ |
|--------------|---|------------------------|---------------|--------------|--|
| 1 | CONTAINER WASTE
204P. | | 4 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding
 per

The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per

Agent must detach and retain this Shipping Order
 and must sign the Original Bill of Lading

2

Permanent post-office address of shipper.

65696 Rediform®

POLY PAK (50 SETS) 6P696.

ORIGINAL
(Red)

Carrier's No.

From: Metro Container Corp.

Carrier

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at Trainer, Pa. 19 from 11/12/87

[illegible]

Consigned to National Waste Disposal (Mail or street address of consignee—For purposes of notification only.)

Destination Ironton, N. Jersey State County

Delivery Address ★ _____
(★ To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

| Delivering Carrier | Car or Vehicle Initials | No. |
|--------------------|-------------------------|-----|
|--------------------|-------------------------|-----|

| No.
Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight
(Lbs. to Cwt.) | Class
or Rate | Check
Cubage |
|-----------------|---|--------------------------|------------------|-----------------|
| 20 | Yard Container | | | |
| | Sludge container | | | |
| | ID No. NJD096839154 | | | |
| | Metro Container Corp. | | | |
| | ID PABO4 454 5895 | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Subject to Section 7 of Conditions of applicable bill of lading, if the shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor.)

If charges are to be prepaid, write or stamp here, "To Be Prepaid."

Received by _____ To apply in prepayment of the charges on the property described herein.

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

† The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification."

† Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced:

1

Shipper, Per _____ Agent, Per _____

Permanent post-office address of shipper.

65696 Rediform®

POLY PAK (50 SETS) 6P696

4

Shipper's No. **8**

Carrier's No.

ORIGINAL
(Red)From: **Metro Container Corp.**

Carrier

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Draiser, Pa.** 19 from **10/27/87**

the property described herein, it is hereby agreed that the shipper (or owner or consignee) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **City Sand Landfill**

(Mail or street address of consignee—For purposes of notification only.)

Destination **Suster, Michigan**

State

County

Delivery Address *

(* To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

Delivering Carrier

Mitchko Trucking

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Check Column | |
|--------------|---|------------------------|---------------|--------------|--|
| 20 | Yard Container | | | | <p>Subject to Section 7 of Conditions of applicability of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:</p> <p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p>(Signature of Consignor.)</p> <p>If charges are to be prepaid, write or stamp here, "To Be Prepaid."</p> |
| | Sludge Container | | | | |
| | ID No. NJD096839154 | | | | |
| | Metro Container Corp. | | | | |
| | ID PAD04 454 5895 | | | | <p>Received \$ _____ to apply prepayment of the charges on the property described herein.</p> <p>Agent or Cashier</p> <p>Per _____
(The signature here acknowledges only the amount prepaid.)</p> <p>Charges Advanced:</p> <p>\$ _____</p> |
| | | | | | |
| | | | | | |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

(Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission)

Shipper, Per

Agent, Per

Permanent post-office address of shipper.

65696 Redifrm®

POLY PAK (30 SETS) 6P696

4

Shipper's No. **ORIGINAL**
Carrier's No. (Red)

From: Matro Container Corp. Carrier

at Trainer, Pa. 19 from 10/6/87

property described herein, in respect of which no attempt is made to indicate the nature and condition of contents of packages unknown, marked, consigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout the contract of carriage to include the vessel, stevedores, wharfmen, and other persons or companies) is to deliver to another carrier on the route to said destination, it is hereby agreed, as to each carrier of all or any of said property over all or any portion of such route to said destination, and as to each carrier of all or any of said property, that the service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth in (1) the Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his agents.

Consigned to National Waste Disposal (Mail or street address of consignee—For purposes of notification only)
Destination Trenton, New Jersey State County

Delivery Address ★ _____
 (*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Column | Remarks |
|--------------|---|-----------------------|---------------|--------------|---|
| 20 | Yard Container | | | | Subject to Section 7 of Conditions of applicat
bill of lading, if this shipment is to be delivered
the consignee without recourse on the consignee, t
consignee shall sign the following statement:
The carrier shall not make delivery of this shi
ment without payment of freight and all other law
charges |
| | Sludge Container | | | | |
| | ID No. NJD096839154 | | | | |
| | Metro Container Corp. | | | | |
| | ID PAID 454 5895 | | | | (Signature of Consignor)
If charges are to be prepaid, write or stamp
here, "To be Prepaid." |
| | | | | | Received \$ _____ to apply
prepayment of the charges on the property describe
herein. |

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

527

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification."

†Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Agent or Contractor

Per _____
(The signature here acknowledges only the owner's record.)

Chewen Adenew

Shipper, Per.

Agent, Pe

Permanent post-office address of signer.

65696 Rediform®

POLY PAK (50 SETS) 6P096



State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-88

| | | | | |
|--|--|--|---|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No.
PAID 041151152715 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law * |
| 3. Generator's Name and Mailing Address
METRO CONTAINER COMPANY
P.O. BOX 4 TRAINER PA 19010 | | | A. State Manifest Document Number
NJA0258631 | |
| 4. Generator's Phone
215 485-6100 | | | B. State Gen. ID
SAME | |
| 5. Designated Facility Name and Site Address
WASTE OIL & WATER, N.J.
COMPOSTABLE LIQUIDS MA 1270 | | | C. State Transporter 1 ID
AE-0139 NJDEPS06209 | |
| | | | D. Transporter's Phone
215-622-8996 | |
| | | | E. State Transporter 2 ID | |
| | | | F. Transporter's Phone | |
| | | | G. State Facility's ID | |
| | | | H. Facility's Phone
609-581-7400 | |

Waste No

001/1701/9010 E X 722

RECEIVED

JAN 27 1991

Metro Container Corp.

TJ LJ

502, 704
F. 1701/9010
Distillation

NEW JERSEY SPECIAL WASTE

NOT A EPA HAZARDOUS WASTE

GENERATOR'S CERTIFICATION: I hereby certify that the waste described on this manifest is not a hazardous waste as defined by the Resource Conservation and Recovery Act (RCRA) and the Federal Hazardous Waste Management and Land Disposal Regulations (40 CFR 261.11).

STEVEN M. ZIMMERMAN

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

DATE 11/10/01 BY 1045

9/1/2001

Michael N. [Signature]

[Signature]

NJA 0258631

Shipper's No.

Carrier's No.

ORIGINAL
(Red)From: **Metro Container Corp.**

Carrier

Subject to the classifications and tariffs in effect on the date of this Shipping Order.

at **Trainer, Pa.** 19 from **9/25/87**

the property described below, in apparent good order, except as noted, and condition of contents of packages unaltered, marked, consigned, and shipped as indicated below, which said carrier (the word carrier being understood throughout this contract meaning any person or corporation in possession of the property under the contract) agree to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Through Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only)

Destination _____ State _____ County _____

Delivery Address ★ **Trenton, New Jersey**
(To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Check Columns | Subject to Section 7 of Conditions of application of bill of lading, if the shipment is to be delivered, the consignee without recourse on the consignor, consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other charges. |
|--------------|---|------------------------|---------------|---------------|---|
| 20 | Yard Container | | | | (Signature of Consignor.)
If charges are to be prepaid, write or stamp "To be Prepaid." |
| | SSudge Container | | | | |
| | ID No. NJD096839154 | | | | |
| | Metro Container Corp. | | | | Received \$ _____ to and prepayment of the charges on the property described herein. |
| | ID PAD04 454 5895 | | | | |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

†The here boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp: not a part of bill of lading approved by the Interstate Commerce Commission.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced:

\$

Shipper, Per _____

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

Permanent post-office address of shipper.

65696 Rediforme

POLY PAK (50 SETS) 6P696

Shipper's No.

Carrier's No.

ORIGINAL
(Red)

From **Matco Container Corp.**

Carrier

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trainer, Pa.** 19 from **8/4/67**

The property described below, in apparent good order, except as noted (contents and condition of packages unknown), marked, consigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract to mean any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—for purposes of notification only)

Destination _____ State _____ County _____

Delivery Address ★ **Trenton, New Jersey**

(★ To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Column | Subject to Section 7 of Conditions of applicat bill of lading, if this shipment is to be delivered to consignee without recourse on the consignor, consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other law charges. |
|--------------|---|-----------------------|---------------|--------------|--|
| 20 | Yard Container | | | | (Signature of Consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid." |
| | Sludge Container | | | | |
| | ID No. NTJUS4239154 | | | | Received by _____ to apply payment of the charges on the property described herein. |
| | Matco Container Corp. | | | | |
| | 10 PARK 456 5895 | | | | Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced:

\$ |
| | | | | | |

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is 'carrier's or shipper's weight.'"

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____

per

"The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification."

(Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.)

Shipper, Per _____

Agent, Per _____

Permanent post-office address of shipper:

65696 Rediforme

POLY PAK (50 SETS) 6P066

Make it
if not a

4

Shipper's No.
Carrier's No.

ORIGINAL
(Red)

Rebels Metro Container Corp.

Carrier

Subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at Trenton, Pa. 19 from 7/29/87

The property described herein, in original and order, subject to terms and conditions of carriage of packages enclosed, marked, conveyed, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to National Waste Disposal

(Mail or street address of consignee—For purposes of notification only)

Destination Trenton, New Jersey State New Jersey County

Delivery Address Trenton, New Jersey

(* To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Check Columns | Subject to Section 7 of Conditions of applic. bill of lading, if the shipment is to be delivered to consignee without recourse on the consignee, consignee shall sign the following statement:
The carrier shall not make delivery of the shipment without payment of freight and all other charges. |
|--------------|---|------------------------|---------------|---------------|---|
| 20 | 1x1x1 Container | | | | (Signature of Consignor)
If charges are to be prepaid, write or state here "To Be Prepaid." |
| | Sludge Container | | | | |
| | ID NO. NJD096839154 | | | | |
| | Rebels Container Corp. | | | | |
| | ID PADN 454 5895 | | | | Received by _____ to apply payment of the charges on the property described herein. |
| | | | | | |
| | | | | | |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

\$00...

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced:

\$

Shipper, Per _____

Agent, Per _____

Permanent post-office address of shipper.

65696 Rediforme

POLY PAK (50 SETS) 65696

Printable for
if not to

ORIGINAL
(Red)

Shipper's No.

Carrier's No.

From **Metro Container Corp.**

Carrier

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trainer, Pa.** 19 from **7/22/87**

The property described below, in apparent good order, except as noted (packages and contents of packages enclosed), marked, consigned, and delivered on indicated below, which said carrier (the word carrier being understood throughout this receipt as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Through Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this meat, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his agent.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only)

Destination _____ State _____ County _____

Delivery Address ★ **Tranton, New Jersey**
(*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Columns | Subject to Section 7 of Conditions of app. bill of lading, if this shipment is to be delivered to consignee without recourse on the carrier, the consignee shall sign the following statement:
The carrier shall not make delivery of the goods without payment of freight and all other charges. |
|--------------|---|-----------------------|---------------|---------------|--|
| 20 | Yard Container | | | | (Signature of Consignor) _____
If charges are to be prepaid, write or here, "To Be Prepaid." |
| | Sludge Container | | | | |
| | 12 NO. NJD096839154 | | | | Received _____ in full of payment of the charges on the property described hereon. |
| | Metro Container Corp. | | | | |
| | 10 PAKS 454 5895 | | | | Agent or Cashier
Per _____
(The signature here acknowledges only the charges prepaid.)
Charges Advanced: _____ |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is 'carrier's or shipper's weight.'"

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____

The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per _____

Agent, Per _____

Permanent post-office address of shipper.

65696 Rediforme

POLY PAK (50 SETS) 6P696

ORIGINAL
IN PER

From: **Metro Container Corp.**

Carrier

Shipper's No.

Carrier's No.

ESCEVE, subject to the classifications and tariffs in effect on the date of the issue of this Shipping Order.

at **Trainer, Pa.** 19 from **6/11/87**

The property described below, in apparent good order, except as noted (contents and condition of packages unknown), marked, consigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only.)

Destination _____ State _____ County _____

Delivery Address ★ **Trenton, New Jersey**

(★ To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Check Column | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. |
|--------------|---|------------------------|---------------|--------------|---|
| 20 | Yard Container,
Sludge Container | | | | (Signature of Consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid." |
| | ID NO. NJD096839154 | | | | |
| | Metro Container Corp. | | | | |
| | ID PAD04 454 5895 | | | | |
| | | | | | Received \$ _____ to apply in prepayment of the charges on the property described hereon. |
| | | | | | |
| | | | | | Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced:
\$ _____ |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Buddy Linder Shipper, Per _____
Permanent post-office address of shipper.

Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

2

65696 Rediform®

POLY PAK (50 SETS) 6P696

ORIGINAL
(Red)

Shipper's No.

Carrier's No.

Received, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at TRINIDAD 19 5-24-67 from 5-24-67

the property described herein is received in good order, except in usual terms and conditions of carriage of packages (weight, marked, certified, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract to mean any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a road-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to NATIONAL BUREAU OF STANDARDS

(Mail or street address of consignee—For purposes of notification only.)

Destination Washington, D.C. State D.C. County

Delivery Address 700 N. 1st St. N.W.
(*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

Delivering Carrier

Car or Vehicle Initials

No.

| No. Package | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Lbs. to Car.) | Class or Rate | Check Column | Subject to Section 7 of Conditions of application of Lading, if this shipment is to be delivered to the consignee without recourse on the carrier, the consignee shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other law charges.

(Signature of Consignee.)

If charges are to be prepaid, write or stamp here: "To Be Prepaid."

Received \$ _____ to apply payment of the charges on the property described herein.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced: \$ _____ |
|-------------|---|-----------------------|---------------|--------------|--|
| 70 | 20 CONTAINERS | | | | |
| | 10 CONTAINERS | | | | |
| | 10 CONTAINERS | | | | |
| | 10 CONTAINERS | | | | |
| | 10 CONTAINERS | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per James L. Smith

Agent, Per

Permanent post-office address of shipper.

65696 Rediforme

POLY PAK (30 SETS) 6P696

4

From: **Metro Container Corp.** Carrier **Carrier's No.**
RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trenton, Pa.** **19** from **2/16/88**
 The property described herein is being transported by carrier as noted (contents and condition of contents of packages unknown), marked, counted, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every carrier to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Through Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a non-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.
 Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal** (Mail or street address of consignee—For purposes of notification only.)
 Destination **Trenton, New Jersey** State **County**
 Delivery Address ***** (*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route
 Delivering Carrier **Car or Vehicle Initials** **No.**

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Column | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor.)
If charges are to be prepaid, write or stamp here, "To Be Prepaid."

Received \$ _____ to apply in prepayment of the charges on the property described herein.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)
Charges Advanced:
\$ |
|--------------|---|-----------------------|---------------|--------------|--|
| 20 | Yard Cont'd ner | | | | |
| | Sludge Container | | | | |
| | INDUSTRIAL ID No. NJD096839154 | | | | |
| | Metro Container Corp. | | | | |
| | ID PAD04 454 5895 | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
 NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
 he agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____
 "The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification."
 Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per **W. J. H. H. H.** Agent, Per **4**
 55696 Rediforme
 POLY PAK (50 SETS) 6P696

Shipper's No.

ORIGINAL
(Red)

Carrier's No.

From: **Metro Container Corp.**

Carrier

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trainer, PA** 19 from **2/1/88**

The property described below, in apparent good order, except as noted (contents and condition of contents of packages external, marked, assigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on its route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time (inserted in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only.)

Destination _____ State _____ County _____

Delivery Address ★ **Trenton, New Jersey**

(* To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Check Column | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor.)
If charges are to be prepaid, write or stamp here, "To Be Prepaid."

Received \$ _____ To apply in payment of the charges on the property described herein.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)
Charges Advanced:
\$ _____ |
|--------------|---|------------------------|---------------|--------------|---|
| 20 | Yard Container | | | | |
| | Sludge Container | | | | |
| | ID No. NJD096839154 | | | | |
| | Metro Container Corp. | | | | |
| | ID PADO4 454 5895 | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

he agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

"The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification."

Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per _____

Agent, Per _____

3

Domestic post-office address of shipper.

55696 Rediform®

ONLY PAK (50 SETS) 6P696



State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved, OMB No. 2050-0039, Expires 9-30-88

UNIFORM HAZARDOUS
WASTE MANIFEST

Information in this manifest is not required by Federal law.

A. State Manifest
Document Number **NJA 0258631**

B. State Gen. ID

C. State Transporter 1 ID

D. Transporter's Phone

E. State Transporter 2 ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

I. Waste No.

K. Hazardous codes for Waste

GENERATOR'S CERTIFICATION

I hereby certify that the material described in this manifest is hazardous waste as defined by the Federal Resource Conservation and Recovery Act (RCRA) and the New Jersey Hazardous Waste Act, and that it is being transported in accordance with the requirements of these laws and regulations.

I further certify that the material described in this manifest is being transported in accordance with the requirements of the Federal Resource Conservation and Recovery Act (RCRA) and the New Jersey Hazardous Waste Act, and that it is being transported in accordance with the requirements of these laws and regulations.

From: **Metro Container Corp.**

Carrier

Shipper's No.

Carrier's No.

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trainer, Pa.** 19 from **1/21/88**

ORIGINAL
(Red)

The property described below, in apparent good order, except as noted (nature and condition of contents of packages unknown), marked, consigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract) assuming any person or corporation in possession of the property under the contract) agrees to carry to its most place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination, it is mutually agreed, to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date thereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

Destination **Trenton, New Jersey**

State

County

(Mail or street address of consignee—For purposes of notification only)

Delivery Address *

(*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | *Weight (Sub. to Car.) | Class or Rate | Check Columns | Subject to Section 7 of Conditions of applicability of bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other law charges. |
|--------------|---|------------------------|---------------|---------------|--|
| 20 | Yard Container | | | | (Signature of Consignor.)
If charges are to be prepaid, write or stamp here, "To Be Prepaid." |
| | Sludge Container | | | | |
| | ID No. NJD095839154 | | | | |
| | Metro Container Corp. | | | | |
| | ID PAD004 454 5845 | | | | Received \$_____ to apply prepayment of the charges on the property described herein. |
| | | | | | |
| | | | | | |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per *[Signature]*

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Agent or Cashier

For _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced:

\$

Shipper, Per

Agent, Per

Permanent post-office address of shipper.

65696 Rediforme

POLY PAK (30 SETS) 6P696



State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(R 9-30-88)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-88

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. | Manifest Document No. | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law * |
|--|--|---|-----------------------|---|--|
| 3. Generator's Name and Mailing Address
METAL CONTA INC
PO BOX 174
CLAYTON, NJ 08312 | | | | A. State Manifest Document Number
NJA 0258631 | |
| 4. Generator's Phone
215 722-8996 | | | | B. State Gen. ID
SAME | |
| 5. Transporter
Waste Conversion | | 6. US EPA ID Number
PA 00186 919 9912 | | C. State Transporter 1 ID
AR-0139 NJDEPS06209 | |
| 7. Shipper
2. Company Name | | 8. US EPA ID Number | | D. Transporter's Phone
215-822-8996 | |
| 9. Designated Facility Name and Site Address
Petroleum Recycling, Inc.
P.O. Box 275 Cenco Blvd.
Clayton, N.J. 08312 | | 10. US EPA ID Number
NJ 00186 41313 1510 | | E. State Transporter 2 ID | |
| 11. Containers
Including Proper Shipping Name, Hazard Class, and Quantity | | | | F. Transporter's Phone | |
| | | | | G. State Facility's ID | |
| | | | | H. Facility's Phone
609-687-7400 | |
| | | | | I. Waste No.
331 11113 E X722 | |
| | | | | | |
| J. Additional Descriptions for Materials Listed Above
a. T, L
b. | | | | K. Handling codes for Wastes Listed Above
a.
b. | |
| 15. Special Handling Instructions and Additional Information
NEED TO BE HANDLED AS
HAZARDOUS WASTE | | | | | |
| GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport, in full compliance with applicable international and national government regulations and in accordance with state laws and regulations.
I am a small quantity generator who has been exempted by statute from the requirement to make a waste minimization certification under Section 3002(c) of RCRA.
I am a small quantity generator who has not been exempted by statute from the requirement to make a waste minimization certification under Section 3002(c) of RCRA.
I am a small quantity generator who has not been exempted by statute from the requirement to make a waste minimization certification under Section 3002(c) of RCRA. | | | | | |
| 17. Transporter's Acknowledgment of Receipt of Materials
Printed Type Name
Date | | | | | |
| 18. Transporter's Acknowledgment of Receipt of Materials
Printed Type Name
Date | | | | | |

1141 m-70022 mg. 2000-2005, 2006-2010, 2011-2015



State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2000-0404. Expires 7-31-86

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1 Generator's US EPA ID No. | 2 Material Description | 3 Page 1 of 1 | Information in the shaded areas is not required by Federal law. |
|---|--|--|--------------------------|----------------------------------|---|
| 3 Generator's Name and Mailing Address | | | | A State Manifest Document Number | NJA0208541 |
| 4 Generator's Company Name | | 5 US EPA ID Number | C State Transporter 1 ID | | |
| 6 Designated Facility Name and Site Address | | 7 US EPA ID Number | D Transporter's Phone | | |
| | | 8 US EPA ID Number | E State Transporter 2 ID | | |
| | | | F Transporter's Phone | | |
| | | | G State Facility's ID | | |
| | | | H Facility's Phone | | |
| 9 Description of Waste (including Proper Shipping Name, Hazard Class, and Quantity) | | 10 | 11 Type | 12 Total Quantity | 13 Waste No. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Additional Descriptions for Materials Listed Above | | K Handling codes for Wastes Listed Above | | | |
| | | | | | |
| | | | | | |
| | | | | | |

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are true and accurate and are properly described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport. I have signed this manifest and it was signed by a person who is authorized to sign for the generator. I have signed this manifest and it was signed by a person who is authorized to sign for the generator. I have signed this manifest and it was signed by a person who is authorized to sign for the generator.

| | | | |
|---------------------------|--|-----------------------------|--|
| 14 Signature of Generator | | 15 Signature of Transporter | |
| 16 Signature of Facility | | 17 Signature of Receiver | |
| 18 Signature of Shipper | | 19 Signature of Consignee | |
| 20 Signature of Carrier | | 21 Signature of Recipient | |
| 22 Signature of Driver | | 23 Signature of Receiver | |
| 24 Signature of Receiver | | 25 Signature of Receiver | |
| 26 Signature of Receiver | | 27 Signature of Receiver | |
| 28 Signature of Receiver | | 29 Signature of Receiver | |
| 30 Signature of Receiver | | 31 Signature of Receiver | |
| 32 Signature of Receiver | | 33 Signature of Receiver | |
| 34 Signature of Receiver | | 35 Signature of Receiver | |
| 36 Signature of Receiver | | 37 Signature of Receiver | |
| 38 Signature of Receiver | | 39 Signature of Receiver | |
| 40 Signature of Receiver | | 41 Signature of Receiver | |
| 42 Signature of Receiver | | 43 Signature of Receiver | |
| 44 Signature of Receiver | | 45 Signature of Receiver | |
| 46 Signature of Receiver | | 47 Signature of Receiver | |
| 48 Signature of Receiver | | 49 Signature of Receiver | |
| 50 Signature of Receiver | | 51 Signature of Receiver | |
| 52 Signature of Receiver | | 53 Signature of Receiver | |
| 54 Signature of Receiver | | 55 Signature of Receiver | |
| 56 Signature of Receiver | | 57 Signature of Receiver | |
| 58 Signature of Receiver | | 59 Signature of Receiver | |
| 60 Signature of Receiver | | 61 Signature of Receiver | |
| 62 Signature of Receiver | | 63 Signature of Receiver | |
| 64 Signature of Receiver | | 65 Signature of Receiver | |
| 66 Signature of Receiver | | 67 Signature of Receiver | |
| 68 Signature of Receiver | | 69 Signature of Receiver | |
| 70 Signature of Receiver | | 71 Signature of Receiver | |
| 72 Signature of Receiver | | 73 Signature of Receiver | |
| 74 Signature of Receiver | | 75 Signature of Receiver | |
| 76 Signature of Receiver | | 77 Signature of Receiver | |
| 78 Signature of Receiver | | 79 Signature of Receiver | |
| 80 Signature of Receiver | | 81 Signature of Receiver | |
| 82 Signature of Receiver | | 83 Signature of Receiver | |
| 84 Signature of Receiver | | 85 Signature of Receiver | |
| 86 Signature of Receiver | | 87 Signature of Receiver | |
| 88 Signature of Receiver | | 89 Signature of Receiver | |
| 90 Signature of Receiver | | 91 Signature of Receiver | |
| 92 Signature of Receiver | | 93 Signature of Receiver | |
| 94 Signature of Receiver | | 95 Signature of Receiver | |
| 96 Signature of Receiver | | 97 Signature of Receiver | |
| 98 Signature of Receiver | | 99 Signature of Receiver | |
| 100 Signature of Receiver | | 101 Signature of Receiver | |

NJA0208541



State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2000-0404. Expires 7-31-81

UNIFORM HAZARDOUS
WASTE MANIFEST

1 Generator's US EPA ID No

Manifest
Document No.

2 Page 1
of

Information in the shaded areas
is not required by Federal law.*

3 Generator's Name and Mailing Address

A. State Manifest
Document Number

NJA0208522

B. State Gen. ID

4 Generator's Phone

5 Transporter 1 Company Name

6

US EPA ID Number

C. State Transporter 1 ID

7 Transporter 2 Company Name

8

US EPA ID Number

D. Transporter's Phone

9 Designated Facility Name and Site Address

10

US EPA ID Number

E. State Transporter 2 ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

11 DOT Hazardous (Including Proper Shipping Name, Hazard Class, and ID Number)

12 Containers

13 Total Quantity

14 Unit
Wt/Vol

I. Waste No.

| | A | B | C | D | E | F | G | H | I |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| a | | | | | | | | | |
| b | | | | | | | | | |
| c | | | | | | | | | |
| d | | | | | | | | | |

J. Additional Descriptions for Materials Listed Above

K. Handling codes for Wastes Listed Above

| | | | |
|----|----|----|----|
| a. | c. | a. | c. |
| b. | d. | b. | d. |

15 Special Handling Instructions and Additional Information

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway, air, rail, or water in accordance with applicable international and national government regulations, and all applicable state laws and regulations.

I am a small quantity generator who has been exempted by statute or regulation from the requirements for a waste management plan under Section 3002(b) of RCRA, and I have a program in place to reduce the volume and toxicity of waste generated to the maximum extent practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the risks to public health and the environment.

Printed/Typed Name: _____ Date: _____

Printed/Typed Name: _____ Date: _____

Printed/Typed Name: _____ Date: _____

Printed/Typed Name: _____ Date: _____

Printed/Typed Name: _____ Date: _____

Printed/Typed Name: _____ Date: _____

Printed/Typed Name: _____ Date: _____

Printed/Typed Name: _____ Date: _____

Printed/Typed Name: _____ Date: _____

In case of an emergency or spill immediately call the nearest emergency response team or the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)



State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

1 ORIGINAL
(Red)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2000-0404. Expires 7-31-86

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1 Generator's US EPA ID No. | 2 Page 1 of | Information in this shaded area is not required by Federal law. |
|--|---------------------|---|-------------|---|
| 3 Generator's Name and Mailing Address | | A State Manifest Document Number NJA 0208522 | | |
| 4 Generator's Phone | | B State Gen. ID | | |
| 5 Transporter 1 Name | 6 US EPA ID Number | C State Transporter 1 ID | | |
| 7 Transporter 2 Name | 8 US EPA ID Number | D Transporter's Phone | | |
| 9 Designated Facility Name and Site Address | 10 US EPA ID Number | E State Transporter 2 ID | | |
| | | F Transporter's Phone | | |
| | | G State Facility's ID | | |
| | | H Facility's Phone | | |
| 11 Description of Waste and Material | | 12 Quantity | 13 Weight | 14 Waste No. |
| Additional Descriptions for Materials Listed Above | | K Handling codes for Wastes Listed Above | | |
| 15 Generator's Certification | | 16 Transporter's Certification | | |
| 17 Disposal Facility's Certification | | 18 Facility's Signature | | |
| 19 Disposal Facility's Signature | | 20 Facility's Name | | |



State of New Jersey
Department of Environmental Protection
Division of Waste Management
CN 028, Trenton, NJ 08625

ORIGINAL
(Red)

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2000-0404 Expires 7-31

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No.

Manifest
Tracking Number

2. Page 1
of

Information in the shaded areas
is not required by Federal law *

3. Generator's Name and Mailing Address

A. State Manifest
Document Number

NJA 020854

B. State Gen. ID: *

4. Generator's Phone

5. Transporter 1 Company Name

6. US EPA ID Number

C. State Transporter 1 ID

7. Transporter 2 Company Name

8. US EPA ID Number

D. Transporter's Phone

9. Designated Facility Name and Site Address

10. US EPA ID Number

E. State Transporter 2 ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers

No.

Type

Total Quantity

14. net
Wt/Vol

I. Waste No

J. Additional Descriptions for Materials Listed Above

K. Handling codes for Wastes Listed Above

L. Special Handling instructions and additional information

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are truly and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by motor vehicle according to applicable international and national government regulations and all applicable state laws and regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the extent that is determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed Type Name

Transporter 1 Acknowledgment of Receipt of Materials

Printed Type Name

Transporter 2 Acknowledgment of Receipt of Materials

Printed Type Name

M. Discrepancy Indication Space

Facility Owner or Operator Acknowledgment of Receipt of Hazardous Materials

Printed Type Name

In case of an emergency or spill immediately call the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

ORIGINAL
(Red)

Shipper's No.

Carrier's No.

From: **Netro Container Corp.**

Carrier

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trenton, Pa.** 19 from **12/30/87**

The property described herein, in accordance with order, except its stated contents and conditions of carriage, is received by the carrier (the word carrier being understood throughout this contract to mean any person or corporation in possession of the property under the contract) to carry to its usual place of delivery or to another carrier on the route to said destination. It is mutually agreed, to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Through Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee for purposes of notification only)

Destination **Trenton, N.J.**

State _____ County _____

Delivery Address *

(* To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Sub to Car) | Class or Rate | Check Column | Subject to Section 7 of Conditions of applica-
bill of lading, if this shipment is to be delivered
the consignee without recourse on the consignor.
The carrier shall not make delivery of this shipment without payment of freight and all other charges. |
|--------------|---|---------------------|---------------|--------------|---|
| 20 | Yard Container
Sludge Container
ID No. NJD096839154
Netro Container Corp.
ID PA004 454 5895 | | | | (Signature of Consignor)
If charges are to be prepaid, write or stamp here: "To Be Prepaid" |
| | | | | | Received _____ to apply
payment of the charges on the property described herein. |
| | | | | | Agent or Consignor |
| | | | | | For _____
(The signature here acknowledges only the amount prepaid.) |
| | | | | | Charges Advanced |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per _____

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp: not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per _____

Agent, Per _____

Permanent post office address of shipper

65696 Rediforme

POLY PAK (50 SETS) 0P096

3

MOLA TRUCKING, INC.

D/B/A MITCHKO TRUCKING

P.O. BOX 414, 650 MYRTLE AVE.
BOONTON, NEW JERSEY 07005

1-201-334-3700-3701-3702

ORIGINAL
(Red)

EPA NJD002779262-

MANIFEST # _____

TRUCK # 1774 TR # Balluff Trailer

DRIVER _____

PICK UP: 12/12/87 / 11:00 AM / WO #

NAME: 1774 Continer

ADDRESS: 8th & Price Sts.

Trainer, P.H.

TIME IN: 11:00 AM TIME OUT: 11:05 AM TOTAL TIME: _____ \$ _____

DELAY EXPLANATION: _____

[Signature]
SIGNATURE: (PICK UP)

INTERMEDIATE: _____
NAME ADDRESS

TIME IN: _____ TIME OUT: _____ TOTAL TIME: _____ \$ _____

DELAY EXPLANATION: _____

[Signature]
SIGNATURE: (INTERMEDIATE)

UNLOAD: _____ / _____
DATE TIME

NIAGARA ☐ OHIO ☐ OTHER 1774 \$ _____

TIME IN: _____ TIME OUT: _____ TOTAL TIME: _____ \$ _____

DELAY EXPLANATION: _____

[Signature]
SIGNATURE (UNLOADING SITE)

Shipper's No. _____
Carrier **Henry Container Corp.** Carrier's No. **(Reg)**
Received, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trainer, Pa.** **19** from **12/16/87**
the property described below, in apparent good order, except as noted (nature and condition of contents of packages unknown), marked, consigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract to mean any person or corporation in possession of the property under this contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Through Bill of Lading or Form (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.
Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal** (Mail or street address of consignee—for purposes of notification only.)
Destination **Dresser Trenton, New Jersey** State _____ County _____
Delivery Address ★ _____
(★ To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)
Route _____

| Delivering Carrier | | Car or Vehicle Initials | | | No. | |
|--------------------|---|-------------------------|---------------|--------------|---|--|
| No. Packages | Kind of Package, Description of Articles, Special Marks, and Endorsements | *Weight (Sub to Car) | Class or Rate | Check Column | Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

If charges are to be prepaid, write or stamp here, "To Be Prepaid"

Received \$ _____ To apply in prepayment of the charges on the property described herein.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)
Charges Advanced
\$ _____ | |
| 20 | Yard Container | | | | | |
| | Sludge Container | | | | | |
| | ID No. NJDC96839154 | | | | | |
| | Sietra Container Corp. | | | | | |
| | ID PADO4 454 5895 | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."
NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____
The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and if other requirements of Uniform Freight Classification.
Shipper's imprint in lieu of stamp: not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per **Willie P. H. H.** Agent, Per _____
Instant past-office address of shipper: _____
IS696 Rediforme
ONLY PAK (50 SETS) 0696

DNR
MICHIGAN DEPARTMENT
OF NATURAL RESOURCES

DO NOT WRITE IN THIS SPACE

1979, as amended and Act 136, P.A.
1988
Failure to file is punishable under
Section 250.548 MCL or Section 10 of
Act 136, P.A. 1988

ATTACH TO DIS. ☐ REL. ☐ PR. ☐

Please print or type

Form Approved OMB No. 2060-0039 Expires 9-30-94

UNIFORM HAZARDOUS
WASTE MANIFEST

Generator's US EPA ID No. **PA004150370** Manifest
of **1** Page **1** Information in the shaded areas
is not required by Federal
law

3. Generator's Name and Mailing Address

WETRO CONTAINER
SECOND & PRICE ST TRUNKER MI 49013

4. Generator's Phone **(215) 485-1000**

5. Transporter 1 Company Name

NATIONAL WASTE DISPOSAL

6. US EPA ID Number

NID001083915A

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

City Disposal Systems
1550 HARPOX
Detroit Mich 48211

10. US EPA ID Number

MI D051683A79

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and
HM ID NUMBER).

12. Containers

No.

Type

13. Total
Quantity

14. Unit
M/Vol

a. **NON-HAZARDOUS Solid NPS**

001 CWA

20 Y

b.

c.

d.

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by
proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway
according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined
to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the
present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste
generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Sidney Levy

Signature

Sidney Levy

Date

12/09/07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

X

Date

12/09/07

18. Transporter 2 Acknowledgement or Receipt of Materials

Printed/Typed Name

Signature

Date

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in
Item 19.

Printed/Typed Name

Anthony W. Rance

Signature

Anthony W. Rance

Date

12/09/07

EMERGENCY ALERTING SYSTEM, IN MICHIGAN AT 1-800-395-3773 OR OUT OF STATE AT 817-373-7960 AND THE NATIONAL RESPONSE CENTER AT 1-800-424-9302 24 HOURS PER DAY.

Shipper's No.

Carrier's No.

ORIGINAL
(Red)

From **Metro Container Corp.** Carrier
RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading

at **Trainer, Pa.** 19 from **XXX 12/3/87**

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and delivered as indicated below, which said carrier (the word carrier being understood throughout this contract to mean any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, on each carrier of all or any of said property over all or any portion of said route to destination, and as to each party of any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to **National Waste Disposal**

(Mail or street address of consignee—For purposes of notification only)

Destination **Trenton, New Jersey** State _____ County _____

Delivery Address * _____
(*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Articles, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Columns | Subject to Section 7 of Conditions of applica-
bill of lading, if this shipment is to be delivered
the consignee without recourse on the consignor, the
consignor shall sign the following statement:

The carrier shall not make delivery of this sh-
ment without payment of freight and all other law-
charges.

(Signature of Consignor.)

If charges are to be prepaid, write or stamp
here, "To Be Prepaid."

Received \$ _____ to apply
prepayment of the charges on the property described
hereon.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount
prepaid.)
Charges Advanced:
\$ _____ |
|--------------|---|-----------------------|---------------|---------------|---|
| 20 | Yard Container | | | | |
| | Sludge Container | | | | |
| | ID No. NJ0096839154 | | | | |
| | Metro Container Corp. | | | | |
| | ID PA004 454 5895 | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

†Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per

Agent, Per

Permanent post-office address of shipper.

65696 Rediform®

POLY PAK (50 SETS) 6P696

4

Shipper's No.

Carrier's No.

ORIGINAL
(Red)

From: Metro Container Corp. Carrier at Trainer, Pa. 19 from November 16, 1987

RESERVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading.

The property described below, in apparent good order, except as noted (nature and condition of contents of packages enclosed, marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood, meaning any person or corporation in possession of the property under the contract) agree to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination, to each carrier of all or any of said property en route to destination, and as to each party of any time involved in all or any of said property, that every service to be performed hereunder shall be subject to the Uniform Domestic Freight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

Consigned to City Sand Landfill

(Mail or street address of consignee—for purposes of notification only.)

Destination Suster, Michigan

State Michigan County

Delivery Address *

(*To be filled in only when shipper desires and governing tariffs provide for delivery thereat.)

Route

Delivering Carrier

Mitenko Trucking

Car or Vehicle Initials

No.

| No. Packages | Kind of Package, Description of Article, Special Marks, and Exceptions | Weight (Sub. to Car.) | Class or Rate | Check Column |
|--------------|--|-----------------------|---------------|--------------|
| 20 | <u>Yard Container</u> | | | |
| | <u>Sludge Container</u> | | | |
| | <u>ID No. IUD096639154</u> | | | |
| | <u>Metro Container Corp.</u> | | | |
| | <u>ID PAD04 454 5895</u> | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Subject to Section 7 of Conditions of applicability of bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor.)

If charges are to be prepaid, write or stamp here: "To Be Prepaid."

Received \$_____ to apply in payment of the charges on the property described herein.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid.)

Charges Advanced:

\$

*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

per

†The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classification.

‡Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

Shipper, Per

Agent, Per

Permanent post-office address of shipper.

65696 Rediform®

POLY PAK (50 SETS) 65696

TIM

IE:

DELAY EXPLANATION:

UNLOAD:

DATE

SIGNATURE (INTERMEDIATE)

TIME

NIAGARA ☐

OHIO ☐

OTHER Sumpter Michigan

\$

TIME IN:

TIME OUT:

TOTAL TIME:

\$

DELAY EXPLANATION:

SIGNATURE (UNLOADING SITE)

ORIGINAL
(Red)



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

12/10/83

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

Attn: Mr Kenneth L Vogt, Jr, PE

Subject: Industrial Wastewater Permit #01-01-644-02-02
Re: November Monthly Report/Quarterly USEPA Priority Pollutant Report

Dear Ken:

Enclosed are subject reports as required by our permit. The total number of drums processed for November was 45,000.

Please let us know if you have any questions or comments on the attached.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer



BETZ • CONVERSE • MURDOCH • INC.
LABORATORY DIVISION-EASTERN GROUP
521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BETZ • CONVERSE • MURDOCH • INC.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19482
215-825-3800
ORIGINAL
(Red)

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
2ND & PRICE STS
TRAINOR, PA 19013

00-701388

11/7/83

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

BCM NUMBER N312391

CLIENT SAMPLE ID SAMPLE

DATE SAMPLED 10/5/83
DATE RECEIVED 10/6/83

TEST AND UNITS (ANAL. METH.)

ALUMINUM MG/L (9) 18.3

BOD/PH (61)

BIOCHEMICAL OXYGEN DEMAND MG/L 1600

PH 8.9

CHLORIDE MG/L (62) 2540

CHEMICAL OXYGEN DEMAND MG/L (5) 4480

COPPER MG/L (24) 0.17

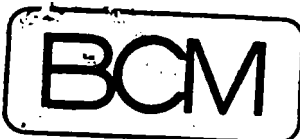
SOLIDS, DISSOLVED MG/L (49) 7396

IRON MG/L (26) 1.47

METAL DIGESTION (NC) MT.DY (110) 10.14

NICKEL MG/L (34) 0.10

RECEIVED
NOV - 8 1983
Metro Container Corp.



BETZ • CONVERSE • MURDOCH • INC.
LABORATORY DIVISION-EASTERN GROUP
521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BETZ • CONVERSE • MURDOCH • INC.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800

ORIGINAL
(Red)

CLIENT

FINAL REPORT

11/7/83 PAGE 2

METRO CONTAINER CORP

00-701388

| BCM NUMBER | | N312391 |
|----------------------------------|------|---------|
| | | ----- |
| OIL | | |
| & GREASE (FR. EXTRACTABLES) MG/L | (6) | 39 |
| LEAD (GF) MG/L | (29) | 0.078 |
| PHENOLS, as PHENOL MG/L | (57) | 4.15 |
| SULFIDE AS S MG/L | | <1 |
| SELENIUM (GF) MG/L | (36) | <0.001 |
| TIN MG/L | (41) | <1.0 |
| SUSPENDED SOLIDS MG/L | (51) | 16 |
| TOTAL ORGANIC CARBON MG/L | (7) | 1770 |
| ZINC MG/L | (44) | 0.13 |

LAB CERT. : EPA/PA-#38007, NJ-#77175, AL- #40300, EPA BULK ASBESTOS Q-#3339
METHODS : 5) EPA # 415.1 6) EPA # 413.1 7) EPA # 415.1 9) EPA # 202.1
24) EPA # 220.1 26) EPA # 236.1 29) EPA # 239.2 34) EPA # 249.1
36) EPA # 270.2 41) EPA # 282.1 44) EPA # 289.1 49) EPA # 160.1
51) EPA # 160.1 57) EPA # 420. (1-2) 61) EPA # 405/150 62) EPA # 325.3
110) EPA - METALS



BETZ • CONVERSE • MURDOCH • INC.
LABORATORY DIVISION-EASTERN GROUP
521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BETZ • CONVERSE • MURDOCH • INC.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19482
215-825-3800

ORIGINAL
(Red)

CLIENT

FINAL REPORT

11/7/83 PAGE

3

METRO CONTAINER CORP

00-701388

END OF REPORT

BCMBETZ CONVERSE MURDOCH INC
LABORATORY DIVISION EASTERN GROUP
215-825-3800
PLYMOUTH MEETING, PA 19002PLEASE PRINT NAME
BETZ CONVERSE MURDOCH
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19002
215-825-3800ORIGINAL
(Red)

CLIENT

METRO CONTAINER CORP
ATTN MR BARDNER FLYNN
2ND & PRICE STS
TRAINOR, PA 19013

00-701388

12/6/83

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

BCM NUMBER N313994

CLIENT SAMPLE ID WATER

DATE SAMPLED 11/1/83

DATE RECEIVED 11/4/83

TEST AND UNITS (ANAL. METH.)

SILVER MG/L (37) 0.02

ALUMINUM MG/L (9) 1.36

ARSENIC (GF) MG/L (12) 0.069

BERYLLIUM MG/L (15) <0.01

BOD/PH (61)

BIOCHEMICAL OXYGEN DEMAND MG/L 1185

PH 7.7

CADMIUM MG/L (16) <0.01

CHLORIDE MG/L (60) 5200

DIAMINE BOD 69 5.00

CHEMICAL BIOLOGICAL DEMAND MG/L

BCMBETZ CONVERSE MURDOCH, INC.
ANALYTICAL DIVISION
2000 W. 10TH AVE.
MINNEAPOLIS, MN 55402BETZ CONVERSE MURDOCH, INC.
ANALYTICAL DIVISION
2000 W. 10TH AVE.
MINNEAPOLIS, MN 55402**FINAL REPORT**

12/6/83 PAGE 2

CLIENT**METRO CONTAINER CORP****00-701388**12/14/83
(Red)

| BCM NUMBER | | N313994 |
|----------------------------------|-------|---------|
| CHROMIUM AS CR MG/L | (19) | 0.08 |
| COPPER MG/L | (24) | 0.03 |
| SOLIDS, DISSOLVED MG/L | (49) | 11420 |
| IRON MG/L | (26) | 1.62 |
| GC/MS ACID EXTRACTABLES MT.DY | | 12.5 |
| GC/MS BASE NEUTRALS MT.DY | | 12.5 |
| GC/MS PESTICIDES MT.DY | | 12.5 |
| GC/MS VOLATILES MT.DY | | 12.5 |
| MERCURY MG/L | (32) | .0009 |
| METAL DIGESTION (NC) MT.DY | (110) | 11.4 |
| NICKEL MG/L | (34) | <0.10 |
| OIL | | |
| & GREASE (FR. EXTRACTABLES) MG/L | (6) | 435 |
| LEAD (GF) MG/L | (29) | 0.019 |
| PHENOLS, as PHENOL MG/L | (57) | 5.75 |
| SULFIDE AS S MG/L | | 1.14 |

BCM**BETZ CONVERSE MURDOCH, INC.**
ANALYTICAL DIVISION EASTERN GROUP
1275 BERTAMOUNT PARK
PLYMOUTH MEETING, PA 19061
215-825-3800**PLEASE RETURN TO:**
BETZ CONVERSE MURDOCH
1275 BERTAMOUNT PARK
PLYMOUTH MEETING, PA 19061
215-825-3800**FINAL REPORT**

12/6/83 PAGE 3

ORIGINAL
(Red)**CLIENT****METRO CONTAINER CORP****00-701388**

| BCM NUMBER | |
|---------------------------|-------------|
| | N313994 |
| | ----- |
| ANTIMONY MG/L | (11) 0.22 |
| SELENIUM (GF) MG/L | (36) <0.001 |
| TIN MG/L | (41) <1 |
| SUSPENDED SOLIDS MG/L | (51) 50 |
| TEMPERATURE DEG C | 17 |
| THALLIUM MG/L | (40) <0.30 |
| TOTAL ORGANIC CARBON MG/L | (7) 876 |
| ZINC MG/L | (44) 0.23 |

LAB CERT. : EPA/PA-#36007, NJ-#77175, AL- #40300, EPA RULE ASBESTOS G-#3339
AIHA/NIOSH-419401-001METHODS : 5) EPA # 415.1 6) EPA # 413.1 7) EPA # 415.1 9) EPA # 202.1
11) EPA # 204.1 12) EPA # 206.2 15) EPA # 210.1 16) EPA # 213.1
19) EPA # 218.1 24) EPA # 220.1 26) EPA # 236.1 29) EPA # 239.2
32) EPA # 245.5 34) EPA # 249.1 36) EPA # 270.2 37) EPA # 272.1
40) EPA # 279.1 41) EPA # 282.1 44) EPA # 289.1 49) EPA # 160.1
51) EPA # 160.1 57) EPA # 400.1(1-2) 61) EPA # 405/130 63) EPA # 320.3
64) EPA # 335.1(2-3) 116) EPA # 8141S



BETZ CONVERSE MURDOCH INC
LABORATORY DIVISION EASTERN GROUP
215-625-0447

BETZ CONVERSE MURDOCH INC
PLYMOUTH MEETING
215-625-0447

CLIENT

METRO CONTAINER CORP

FINAL REPORT

00-701388

12/6/83 PAGE

4

ORIGINAL
(Red)

END OF REPORT

ORIGINAL

FLOW SUMMARY FOR 1981

FLOW TO DELCORA (GPD)

| | |
|--------------------------------|--------|
| 60 HP compressor..... | 4300 |
| 100 HP " | 4600 |
| Flush-a-matic pump cooler..... | 2300 |
| Dedenter " " | 2300 |
| Acid pump coolers..... | 850 |
| Domestic sewage..... | 650 |
| | 15,000 |

14,350



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

10/21/83

Attn: Mr Kenneth L Vogt, Jr, PE

Subject: industrial Wastewater Permit #01-01-644-02-02
Re: September Monthly Report - 9/27/83 Letter

Dear Ken:

Enclosed is the required monthly report which is late due to BCM's excessive turnaround time, which in this case, is over a month. We submit samples to BCM on the first Thursday of every month which in the last sample was 9/7/83 and did not receive the results until 10/17/83. Also enclosed is the July monthly report and the number of barrels processed which are as follows: July-32,000; August-36,000; and September-38,000.

With regards to the excessive values reported in both the August and September monthly reports, we will be increasing the discharge frequency so as to maintain lower parameter values by taking on more fresh water while remaining within the volume limitations specified by the permit. Our next sample for October should reflect significantly lower values.

Please let us know if you have any further questions or comments.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer

108 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS Second & Price Streets

CITY Trainor STATE PA

ZIP 19013 PHONE NUMBER

PERMIT NO. 01-01-0644-02-02
S.I.C. CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

ORIGINAL
(Red)

| MONTH AND YEAR | DATE | DAY OF THE WEEK | PRECIPITATION INCHES | TYPE OF SAMPLE | FLOW MGD | TEMPERATURE OF | PH | SUSPENDED SOLIDS mg/l | TOTAL DISSOLVED SOLIDS mg/l | BOD ₅ mg/l | COD mg/l | PHENOLS mg/l | SULFIDES mg/l | K - NITROGEN mg/l | CHLORIDES mg/l | MERCURY mg/l | IRON mg/l | COPPER mg/l | ZINC mg/l | NICKEL mg/l | CHROMIUM mg/l | CYANIDE mg/l | OIL AND GREASE mg/l | TURBIDITY J.T.U. | COLOR | OTHER Hg mg/l | OTHER Lead mg/l | OTHER Selenium mg/l | Tin mg/l | TOC mg/l | REMARKS |
|----------------|------|-----------------|----------------------|----------------|----------|----------------|-----|-----------------------|-----------------------------|-----------------------|----------|--------------|---------------|-------------------|----------------|--------------|-----------|-------------|-----------|-------------|---------------|--------------|---------------------|------------------|-------|---------------|-----------------|---------------------|----------|----------|---------|
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| | 6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sep 83 | 7 | W | 2" | F | 2005 | 75 | 7.5 | 124 | 200 | 200 | 200 | 72.1 | 9.3 | | 1700 | | 3.62 | 0.05 | 0.07 | 0.15 | | | 34 | | | | | | | | |
| | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

11 Certifying Signatures

Company Name BCM Laboratory Street Address 521 W. Germantown Pk. zip 19401
Norristown State PA Phone NO 215-825-0447

Testing Laboratory

Signature Title
Name Frank J. Kernozek, PhD Date
(print or type)

Signature Title
Name Gardner K Flynn Date
(print or type)

ORIGINAL
1983
YEAR

July 83

ZIP 19013

PHONE NUMBER

S.F.C.
CODE

3412

| DATE | DAY OF THE WEEK | PRECIPITATION INCHES | TYPE OF SAMPLE | FLOW MGD | TEMPERATURE OF | PH | SUSPENDED SOLIDS mg/l | TOTAL DISSOLVED SOLIDS mg/l | BOD ₅ mg/l | COD mg/l | PHENOLS mg/l | SULFIDES mg/l | K - NITROGEN mg/l | CHLORIDES mg/l | MERCURY mg/l | IRON Fe mg/l | COPPER mg/l | ZINC mg/l | NICKEL mg/l | CHROMIUM mg/l | CYANIDE mg/l | OIL AND GREASE mg/l | TURBIDITY J.T.U. | COLOR | OTHER | OTHER | OTHER | REMARKS |
|------------------|-----------------|----------------------|----------------|----------|----------------|----|-----------------------|-----------------------------|-----------------------|----------|--------------|---------------|-------------------|----------------|--------------|--------------|-------------|-----------|-------------|---------------|--------------|---------------------|------------------|-------|-------|-------|-------|---------|
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| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL
AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

No Discharge

TOTAL
AVERAGE

Certifying Signatures

Testing Laboratory

Company

any Name C.E. Moore, Inc. Street Address 407 W. Lincoln Hwy. zip 19341

Signature *Daniel R. Hudson* Title *Asst. Eng.* Signature _____ Title _____

on _____ State PA Phone No. (215) 363-9500

Name Daniel R. Hudson Date 26 AUG 83 Name _____ (print or type) Date _____ (print or type)



BETZ • CONVERSE • MURDOCH • INC.
LABORATORY DIVISION-EASTERN GROUP
821 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-625-0447

ORIGINAL
(Red)

PLEASE REMIT CHECKS TO:
BETZ • CONVERSE • MURDOCH • INC.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-625-3800

CLIENT

FINAL REPORT

10/13/83 PAGE 2

METRO CONTAINER CORP

00-701388

| BCM NUMBER | |
|----------------------------------|-------------|
| | N310468 |
| OIL | |
| & GREASE (FR. EXTRACTABLES) MG/L | (6) 34 |
| LEAD (GF) MG/L | (29) 0.279 |
| PHENOLS, as PHENOL MG/L | (57) 72.1 |
| SULFIDE AS S MG/L | 4.3 |
| SELENIUM (GF) MG/L | (36) <0.005 |
| TIN MG/L | (41) <1.0 |
| SUSPENDED SOLIDS MG/L | (51) 124 |
| SPECIAL TEST(S), SEE (1) MT.DY | 10.13 |
| TOTAL ORGANIC CARBON MG/L | (7) 2420 |
| ZINC MG/L | (44) 0.09 |

ENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



BETZ • CONVERSE • MURDOCH • INC.
LABORATORY DIVISION-EASTERN GROUP
521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BETZ • CONVERSE • MURDOCH • INC.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800

ORIGINAL
(Red)

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
2ND & PRICE STS
TRAINOR, PA 19013

00-701388

10/13/83

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

| | |
|--------------------------------|---------------|
| BCM NUMBER | N310468 |
| CLIENT SAMPLE ID | ----- |
| DATE SAMPLED | RECYCLE P |
| DATE RECEIVED | LANT STOR |
| TEST AND UNITS | 9/7/83 |
| ALUMINUM MG/L | 9/8/83 |
| BOD/PH | (ANAL. METH.) |
| BIOCHEMICAL OXYGEN DEMAND MG/L | (9) 0.26 |
| PH | (61) |
| CHLORIDE MG/L | 2800 |
| CHEMICAL OXYGEN DEMAND MG/L | 7.5 |
| COPPER MG/L | (62) 17800 |
| SOLIDS, DISSOLVED MG/L | (5) 12250 |
| IRON MG/L | (24) 10.03 |
| TOTAL DIGESTION (NO) MT.DY | (49) 50752 |
| CNEL MG/L | (26) 3.62 |
| | (110) 9.13 |
| | (34) 0.15 |

IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.

ORIGINAL
(Red)



BETZ • CONVERSE • MURDOCH • INC.
LABORATORY DIVISION-EASTERN GROUP
521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-625-0447

PLEASE REMIT CHECKS TO:
BETZ • CONVERSE • MURDOCH • INC.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19482
215-625-3800

CLIENT

METRO CONTAINER CORP

FINAL REPORT

00-701388

10/13/83 PAGE

3

REMARKS

BCM SAMPLE NO: N310468

~~SAMPLE ID: RECYCLE PLANT STORAGE TANK~~

LAB CERT. : EPA/PA-#38007, NJ-#77175, AL- #40300
METHODS : 5) EPA # 415.1 6) EPA # 413.1 7) EPA # 415.1 9) EPA # 202.1
24) EPA # 220.1 26) EPA # 236.1 29) EPA # 239.2 34) EPA # 249.1
36) EPA # 270.2 41) EPA # 282.1 44) EPA # 289.1 49) EPA # 160.1
51) EPA # 160.1 57) EPA # 420.1-2 61) EPA # 405/150 62) EPA # 325.3
110) EPA - METALS

END OF REPORT

RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

J. Levey
ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

9/13/83

Attn: Mr Kenneth L Vogt, Jr, PE

Subject: Industrial Wastewater Permit #01-01-0644-02-02
Re: August Monthly Report

Dear Ken:

Attached please find subject report as required by DELCORA.
Please let us know if you have any questions and/or comments
relative to the report.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer



BETZ • CONVERSE • MURDOCH • INC.
LABORATORY DIVISION-EASTERN GROUP
621 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-625-0447

PLEASE REMIT CHECKS TO:
BETZ • CONVERSE • MURDOCH • INC.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19402
215-625-3800

ORIGINAL
(Red)

CLIENT

METRO CONTAINER CORP

FINAL REPORT

00-701388

9/9/83 PAGE 2

| BCM NUMBER | |
|---------------------------|-------------|
| LEAD (GF) MG/L | N308566 |
| PH | (29) 0.019 |
| PHENOLS, as PHENOL MG/L | (55) 6.8 |
| SULFIDE AS S MG/L | (57) 11.3 |
| SELENIUM (GF) MG/L | 52.0 |
| TIN MG/L | (36) <0.001 |
| UNPENDED SOLIDS MG/L | (41) 9.82 |
| TOTAL ORGANIC CARBON MG/L | (51) 30 |
| NC MG/L | (7) 1810 |
| | (44) 0.06 |

ARKS

SAMPLE NO: N308566

TOC-SAMPLE MARKED "H2SO4" NOT FIXED TO <2 PH

RT. : EPA/PA-438007, NJ-477175, AL-440300

UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



BETZ • CONVERSE • MURDOCH • INC.
LABORATORY DIVISION-EASTERN GROUP
821 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BETZ • CONVERSE • MURDOCH • INC.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800

ORIGINAL
(10-1)

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
2ND & PRICE STS
TRAINOR, PA 19013

00-701388

9/9/83

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

| | |
|------------------------------|---------------|
| BCM NUMBER | N308566 |
| CLIENT SAMPLE ID | ----- |
| DATE SAMPLED | EFF DISCH |
| DATE RECEIVED | ARGE |
| TEST AND UNITS | 8/4/83 |
| ALUMINUM MG/L | 8/4/83 |
| | (ANAL. METH.) |
| BIOCHEMICAL | (9) 0.41 |
| OXYGEN DEMAND MG/L | |
| CHLORIDE MG/L | (4) 2000 |
| CHEMICAL OXYGEN DEMAND MG/L | (62) 19600 |
| UPPER MG/L | (5) 5220 |
| CLIDS, DISSOLVED MG/L | (24) <0.03 |
| ON MG/L | (49) 45600 |
| AL DIGESTION (NC) MT.DY | (26) 2.5 |
| REL MG/L | (110) 8.10 |
| | (34) <0.10 |
| EASE (FR. EXTRACTABLES) MG/L | (6) 49 |

DUPLICATE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



BETZ • CONVERSE • MURDOCH • INC.
LABORATORY DIVISION-EASTERN GROUP
821 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BETZ • CONVERSE • MURDOCH • INC.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800

ORIGINAL
(Red)

FINAL REPORT

9/9/83 PAGE

3

CLIENT

METRO CONTAINER CORP

00-701388

METHODS : 4) EPA # 405.1 5) EPA # 415.1 6) EPA # 413.1 7) EPA # 415.1
9) EPA # 202.1 24) EPA # 220.1 26) EPA # 236.1 29) EPA # 239.2
34) EPA # 249.1 36) EPA # 270.2 41) EPA # 282.1 44) EPA # 289.1
49) EPA # 160.1 51) EPA # 160.1 55) EPA # 150.1 57) EPA # 420.(1-2)
62) EPA # 325.3 110) EPA - METALS

END OF REPORT

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.

100 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS Second & Price Streets
CITY Trainer STATE PA
ZIP 19013 PHONE NUMBER

PERMIT
NO. 01-01
0604-02-02
S.I.C.
CODE 3412

DELUCA
MONTHLY REPORT FORM
OFFICIAL USE ONLY

| MONTH
AND
YEAR | DATE | DAY OF THE
WEEK | PRECIPITATION
INCHES | TYPE OF
SAMPLE | FLOW
MGD | TEMPERATURE | | PH | SUSPENDED
SOLIDS mg/l | TOTAL DISSOLVED
SOLIDS mg/l | BOD ₅
mg/l | COD
mg/l | PHENOLS
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mg/l | K - NITROGEN
mg/l | CHLORIDES
mg/l | MERCURY
Hg mg/l | IRON
Fe mg/l | COPPER
mg/l | ZINC
mg/l | NICKEL
mg/l | CHROMIUM
mg/l | CYANIDE
mg/l | OIL AND GREASE
mg/l | TURBIDITY
J.T.U. | COLOR | OTHER | | | | | REMARKS |
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| | | | | | | OF | | | | | | | | | | | | | | | | | | | | | ALUMINUM mg/l | LEAD mg/l | SILICUM mg/l | TIN mg/l | TOC mg/l | |
| August 83 | 1 | 5 | 6 | 7 | 8 | 9 | | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | | 32 | |
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| TOTAL
AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Certifying Signatures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Testing Laboratory | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| C. G. M. M. 7/10/83 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

1. Certifying Signatures

Testing Laboratory

Company Name RCM Laboratory Street Address 521 N. Germantown Pike Zip 19401
City Norristown State PA Phone No. 215-825-0447

Signature [Signature] Title Lab
Name Frank J. Kernozek, Ph.D. Date 9/9/83
(print or type)

Signature [Signature] Title PE
Name CKFLYN JR Date 9/13/83

ORIGINAL
(Red)

DELCORA
100 East Fifth Street
Chester, Pennsylvania 19013

COMPANY NAME Metro Container Corp.

STREET ADDRESS 2nd & Price Streets

CITY Trainer STATE PA

ZIP 19013 PHONE NUMBER _____

PERMIT NO. 66-1

S.I.C. CODE 3412

DELCORA
MONTHLY REPORT FORM
OFFICIAL USE ONLY

| MONTH AND YEAR | DATE | DAY OF THE WEEK | PRECIPITATION INCHES | TYPE OF SAMPLE | FLOW MGD | TEMPERATURE OF | PH | SUSPENDED SOLIDS mg/l | TOTAL DISSOLVED SOLIDS mg/l | BOD ₅ mg/l | COD mg/l | PHENOLS mg/l | SULFIDES mg/l | K - NITROGEN mg/l | CHLORIDES mg/l | MERCURY Hg mg/l | IRON Fe mg/l | COPPER mg/l | ZINC mg/l | NICKEL mg/l | CHROMIUM mg/l | CYANIDE mg/l | OIL AND GREASE mg/l | TURBIDITY J.T.U. | COLOR | OTHER AL | OTHER Pb | OTHER Po4 | REMARKS |
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| TOTAL | 31 | WED | 0.006 | | | 49 | 12.2 | 500 | 8100 | 788 | 3070 | 1.7 | - | - | 5610 | - | - | - | 0.3 | - | 410 | - | 258 | - | | 11.0 | 1.87 | 49.2 | |
| AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Company Name C.E. Moore, Inc. Street Address 407 W. Lincoln Hwy. City Exton State PA Zip 19341

Signature [Signature] Title Eng Signature [Signature] Title Eng

ORIGINAL
(Red)

DELCORA
100 East Fifth Street
Chester, Pennsylvania 19013

COMPANY NAME Metro Container Corp.

STREET ADDRESS 2nd & Price Streets

CITY Trainer STATE PA

ZIP 19013 PHONE NUMBER _____

PERMIT
NO. 66-1

S.I.C.
CODE 3412

DELCORA
MONTHLY REPORT FOR
OFFICIAL USE ONLY

| MONTH
AND
YEAR | DATE | DAY OF THE
WEEK | PRECIPITATION
INCHES | TYPE OF
SAMPLE | FLOW
MGD | TEMPERATURE
OF | PH | SUSPENDED
SOLIDS mg/l | TOTAL DISSOLVED
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Hg mg/l | IRON
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Testing Laboratory

pany Name C.E. Moore, Inc. Street Address 407 W. Lincoln Hwy. zip 19341
Exton PA

Signature Daniel R. Hinder Title Manager Company CEM

ORIGINAL
(Red)

Clatsop, Pennsylvania 19013

CITY Trainer STATE PA
ZIP 19013 PHONE NUMBER _____

NO. 160
S.I.C. CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

| MONTH AND YEAR | DATE | DAY OF THE WEEK | PRECIPITATION INCHES | TYPE OF SAMPLE | FLOW MGD | TEMPERATURE OF | PH | SUSPENDED SOLIDS mg/l | TOTAL DISSOLVED SOLIDS mg/l | BOD ₅ mg/l | COD mg/l | PHENOLS mg/l | SULFIDES mg/l | K - NITROGEN mg/l | CHLORIDES mg/l | MERCURY Hg mg/l | IRON Fe mg/l | COPPER mg/l | ZINC mg/l | NICKEL mg/l | CHROMIUM mg/l | CYANIDE mg/l | OIL AND GREASE mg/l | TURBIDITY J.T.U. | COLOR | OTHER | OTHER | OTHER | REMARKS |
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No Discharge

Reporting Signatures _____ Testing Laboratory _____
 Name C.E. Moore, Inc. Street Address 407 W. Lincoln Hwy. Zip 19341 Signature Daniel R. Hudson Title Owner
 Name Daniel R. Hudson (print or type) Date 1/10/83 Name W. FLYAN (print or type) Date _____
 State PA Phone No. (215) 363-9500



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

ORIGINAL
(Red)

Pa Department of Environmental
Resources
Solid Waste Division
Ridley Creek State Park
Sycamore Mills Rd
Media, Pa 19063
(215) 566-4800

Attention: Mr. Bob Pader

Subject: Analytical Data Concerning the Content of Universal
Container Discharge to DELCORA

Dear Sir:

Confirming our 2/4/83 conversation on the subject, typical values
of organic products are indicated by the following:

- (1) TOC - 1450-1650 ppm
- (2) COD - 5500-5850 ppm
- (3) O/G - 34-70 ppm
- (4) Phenol - 0.89-3.04 ppm

We have no specific organics identified at this time since we
are not required by DELCORA under the current permit.

All the above analysis were performed by R F Weston. Should you
require copies of any analysis, they will be supplied to you
upon request. Please let us know if you have any further questions
or comments.

Sincerely,

Gardner K Flynn, Jr.
Consulting Engineer

✓cc: S Levy, Universal Container Corp.

100 East Fifth Street
Chester, Pennsylvania 19013

COMPANY NAME BECK'S CONTAINER CORP
STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

PERMIT
NO. 01-01
0644-02-02
S.I.C.
CODE 3412

SELECON
MONTHLY REPORT FORM
OFFICIAL USE ONLY

| MONTH
AND
YEAR | DATE | DAY OF THE
WEEK | PRECIPITATION
INCHES | TYPE OF
SAMPLE | FLOW
MGD | TEMPERATURE
OF | PH | SUSPENDED
SOLIDS mg/l | TOTAL DISSOLVED
SOLIDS mg/l | BOD ₅
mg/l | COD
mg/l | PHENOLS
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TDC mg/l | OTHER
Aluminum mg/l | REMARKS | |
|----------------------|------|--------------------|-------------------------|-------------------|-------------|-------------------|-----|--------------------------|--------------------------------|--------------------------|-------------|-----------------|------------------|----------------------|-------------------|--------------------|-----------------|----------------|--------------|----------------|------------------|-----------------|------------------------|---------------------|-------|-------------------|-------------------|------------------------|---------|--|
| November 83 | 1 | Tues. | | | | | 7.7 | 50 | 11420 | 1185 | 4015 | 5.75 | <1.0 | | 5200 | 0.009 | 1.62 | 0.03 | 0.23 | <0.10 | 0.08 | 3.08 | 433 | | | 4015 | 876 | 1.36 | 12 | |
| | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TOTAL
AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

1 Certifying Signatures

Testing Laboratory

Company Name BCM LABORATORY Street Address 521 W GERMANTOWN PKWY City PHILADELPHIA State PA Zip 19101

City NORRISTOWN State PA Phone NO (215) 825-0447

Signature Karen R. Holbrook Title Lab Services
Signature KAREN R. HOLBROOK Date 11/6/83

Signature [Signature] Title PE
Name GARDNER K. GARDNER JR Date 11/6/83

100 East Fifth Street
Chester, Pennsylvania 15013

STREET ADDRESS SECOND & PRICE STS
CITY TRATNER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

PERMIT
NO. 01-01
0644-02-02
S.I.C.
CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

| MONTH
AND
YEAR | DATE
ORIGINAL
COPY
MADE | DAY OF
WEEK | PRECIPITATION
INCHES | TYPE OF
SAMPLE | FLOW
MGD | TEMPERATURE
OF | PH | SUSPENDED
SOLIDS mg/l | TOTAL DISSOLVED
SOLIDS mg/l | BOC
1/5
mg/l | COO
mg/l | PHENOLS
mg/l | SULFIDES
mg/l | K - NITROGEN
mg/l | CHLORIDES
mg/l | MERCURY
mg/l | IRON
Fe mg/l | COPPER
mg/l | ZINC
mg/l | NICKEL
mg/l | CHROMIUM
mg/l | CYANIDE
mg/l | OIL AND GREASE
mg/l | TURBIDITY
J.T.U. | OTHER | OTHER | OTHER | REMARKS |
|----------------------|----------------------------------|----------------|-------------------------|-------------------|-------------|-------------------|-----|--------------------------|--------------------------------|--------------------|-------------|-----------------|------------------|----------------------|-------------------|-----------------|-----------------|----------------|--------------|----------------|------------------|-----------------|------------------------|---------------------|-------|-------|-------|---------|
| 1988-13 | 1 | THURS. | 0.0 | F | 0.000 | 80 | 7.7 | 50 | 11420 | 1180 | 4015 | 5.75 | 11.0 | | 5200 | 0.004 | 1.62 | 0.03 | 0.23 | 0.10 | 0.08 | 3.08 | 433 | | | | | |
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| ALL
PAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

certifying Signatures

Testing Laboratory

Company Name BCM LABORATORY Street Address 521 W GERMANTOWN PHILP ZIP 19401

Signature Harold R. Holbrook
LAB SERVICES
TITLE Rep.

Signature GF-001 Company

TITLE Rep.

100 East Fifth Street
Chastor, Pennsylvania 19013

STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

PERMIT
NO. 01-01
0644-02-02
S.I.C.
CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

Units Processed - 38,000

| MONTH
AND
YEAR | DATE | DAY OF THE
WEEK | PRECIPITATION
INCHES | TYPE OF
SAMPLE | FLOW
MGD | TEMPERATURE
OF | PH | SUSPENDED
SOLIDS mg/l | TOTAL DISSOLVED
SOLIDS mg/l | BOD ₅
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Hg mg/l | IRON
Fe mg/l | COPPER
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mg/l | NICKEL
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J.T.U. | COLOR | OTHER | OTHER | OTHER | OTHER | OTHER | REMARKS | | |
|----------------------|------|--------------------|-------------------------|-------------------|-------------|-------------------|-----|--------------------------|--------------------------------|--------------------------|-------------|-----------------|------------------|----------------------|-------------------|--------------------|-----------------|----------------|--------------|----------------|------------------|-----------------|------------------------|---------------------|-------|---------------|-----------|---------------|----------|-----------|---------|--|--|
| | | | | | | | | | | | | | | | | | | | | | | | | | | Aluminum mg/l | Lead mg/l | Selenium mg/l | Tin mg/l | Zinc mg/l | | | |
| February 1984 | 1 | S | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| PAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Verifying Signatures

Testing Laboratory

Company Name BCM LABORATORY Street Address 521 W GERMANTOWN PKWY City PHILADELPHIA State PA Zip 19104

Signature SA Nordstrom Title Coord. Signature GARDNER Title PE
Name Sharon A Nordstrom Date 3/7/84 Name GARDNER R

100 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

PERMIT
NO. 01-01
0644-02-02
S.I.C.
CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

| MONTH
AND
YEAR | DATE | DAY OF THE
WEEK | PRECIPITATION
INCHES | TYPE OF
SAMPLE | FLOW
MGD | TEMPERATURE
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SOLIDS mg/l | TOTAL DISSOLVED
SOLIDS mg/l | BOD ₅
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mg/l | TURBIDITY
J.T.U. | COLOR | OTHER
Aluminum mg/l | OTHER
Selenium mg/l | OTHER
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| October 83 | 5 | | | | | | 8.9 | 16 | 3396 | 1600 | 4480 | 9.15 | <1 | - | 2540 | - | 1.47 | 2540 | 0.13 | <0.1 | - | - | 39 | - | - | 18.3 | <0.004 | <1.0 | 0.07 | 1770 | | |
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| TOTAL
AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

1) Certifying Signatures

Testing Laboratory

Company Name BCM LABORATORY Street Address 521 W GERMANTOWN PKWY Zip 19401
City NORRISTOWN State PA Phone NO (215) 825-0447

Signature SA Nordstrom Title Lab. Sec. COOP
Name Sharon A. Nordstrom Date 11/6/83
(print or type)

Signature GARDNER K ELYNN, JR Title PE
Name GARDNER K ELYNN, JR Date
(print or type)

OFFICIAL USE ONLY

B.I.C.
CODE 3412

THE CASE

J. LEVY

FLOW SUMMARY FOR 1981

Prior To 12-8 (ORIGINAL
(Red))

CHESTER WATER AUTHORITY FLOW TO PLANT (GPD)

| | |
|---------------------------------|---------------|
| 60 HP Compressor..... | 4300 |
| 100 HP " | 4600 |
| Flush-a-matic pump cooler..... | 2300 |
| Dedenter " " | 2300 |
| Acid pump coolers..... | 850 |
| Boiler..... | 9450 |
| Chemical mixing (recycling).... | 650 |
| Domestic sewage..... | 650 |
| Recycling system makeup..... | 14,500 |
| Acid fume scrubber..... | 3,000 |
| Paint " " | 3,000 |
| | <u>45,600</u> |

WATER LOSSES IN PLANT (GPD)

| | |
|-------------------------------|---------------|
| Boiler evaporation..... | 9450 |
| Chemical mixing..... | 650 |
| Process tanks evaporation.... | 7000 |
| Rinse tanks evaporation..... | 4000 |
| Oil removal..... | 500 |
| Sludge " | 2000 |
| Acid fume scrubber evap..... | 3000 |
| Paint " " | 3000 |
| Oven evaporation..... | 1000 |
| | <u>30,600</u> |

FLOW TO DELCORA (GPD)..... 15,000

Creek

ORIGINAL
(Red)



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

3/13/84

Attn: Mr Kenneth L Vogt, Jr, PE

Subject: Industrial Wastewater Permit #01-01-644-02-02

Re: February 1984 Monthly Report/Quarterly USEPA Priority Pollutant Report

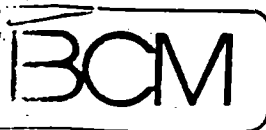
Dear Ken:

Enclosed are subject reports as required by our permit. Please let me know if you have any questions, or if I may be of further assistance.

Very truly yours,

A handwritten signature in black ink, appearing to read 'GK Flynn', written over a horizontal line.

Gardner K Flynn, Jr
Consulting Engineer



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800

ORIGINAL
(Red)

CLIENT

RETRO CONTAINER CORP
ATTN: ACCOUNTS PAYABLE
2ND & PRICE STS
TRAINOR, PA 19013

3/13/84

CLIENT # 00-701386
INVOICE # 703125

INVOICE

REF #

PAGE 1

| BCM
NUMBER | SAMPLE ID
DATE SAMPLED | DATE COMPLETED
DATE REPORTED | COST |
|---------------|--------------------------------|---------------------------------|-----------|
| 1401643 | WASTE WATER PLANT OF
2/9/84 | 3/6/84
3/7/84 | \$ 793.90 |
| 1 AG | 1 AL | 1 AS | |
| 1 BE | 1 BODPH | 1 CD | |
| 1 CL | 1 CN | 1 COD | |
| 1 CP | 1 CU | 1 DE | |
| 1 FE | 1 GCHSAE | 1 GCHSEN | |
| 1 GCHSPS | 1 GCHSVO | 1 HG | |
| 1 MET/DG | 1 NI | 1 OG | |
| 1 PB-GF | 1 PHOL | 1 S | |
| 1 SE | 1 SE | 1 SN | |
| 1 SS | 1 TL | 1 TOC | |
| 1 ZN | | | |

TOTAL - PAY THIS AMOUNT \$ 793.90

INVOICE TOTAL CONTAINS DISCOUNT IF APPLICABLE

*** END OF INVOICE ***

RECEIVED

BCM Eastern Inc.



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

2/10/84

Attn: Mr Kenneth L Vogt, Jr, PE

Subject: Industrial Wastewater Permit #01-01-644-02-02
Re: January 1984 Monthly Report

Dear Ken:

Enclosed is subject report as required by our permit which includes the total # of drums processed.

Please let us know if you have any questions or comments on the attached.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer

RECEIVED
FEB 19 1984
Metro Container Corp.

BELCORA
100 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

PERMIT
NO. 01-01
0644-02-02
S.I.C.
CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

Units Processed: 27,000

| MONTH
AND
YEAR | DATE
(Red)
DAY OF THE
WEEK | PRECIPITATION
INCHES | TYPE OF
SAMPLE | FLOW
MGD | TEMPERATURE
OF | PH | SUSPENDED
SOLIDS mg/l | TOTAL DISSOLVED
SOLIDS mg/l | BOD ₅
mg/l | COD
mg/l | PHENOLS
mg/l | SULFIDES
mg/l | K - NITROGEN
mg/l | CHLORIDES
mg/l | MERCURY
Hg mg/l | IRON
Fe mg/l | COPPER
mg/l | ZINC
mg/l | NICKEL
mg/l | CHROMIUM
mg/l | CYANIDE
mg/l | OIL AND GREASE
mg/l | TURBIDITY
J.T.U. | COLOR | OTHER
Aluminum mg/l | OTHER
Selenium mg/l | OTHER
Lead mg/l | TIN, mg/l | TOC, mg/l | REMARKS |
|----------------------|-------------------------------------|-------------------------|-------------------|-------------|-------------------|-----|--------------------------|--------------------------------|--------------------------|-------------|-----------------|------------------|----------------------|-------------------|--------------------|-----------------|----------------|--------------|----------------|------------------|-----------------|------------------------|---------------------|-------|------------------------|------------------------|--------------------|-----------|-----------|---------|
| JANUARY 84 | 1 | SUN | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 2 | MON | 0.051 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 3 | TUE | 0.070 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 4 | WED | 0.045 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 5 | THURS | 0.043 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 6 | FRI | 0.003 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 7 | SAT | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8 | SUN | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 9 | MON | 0.003 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 10 | TUES | 0.002 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 11 | WED | 0.035 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| JANUARY 84 | 12 | THURS | 0.002 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 13 | FRI | 0.055 | | | 7.0 | 4.5 | 29400 | 1530 | 3760 | 4.65 | <1 | | 1240 | | 0.21 | 0.30 | 1.88 | <0.1 | | | 18 | | Y- | 0.36 | <0.01 | 0.17 | 4.0 | 480 | |
| | 14 | SAT | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 15 | SUN | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 16 | MON | 0.027 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 17 | TUES | 0.032 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 18 | WED | 0.019 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 19 | THURS | 0.042 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 20 | FRI | 0.010 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 21 | SAT | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 22 | SUN | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 23 | MON | 0.007 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 24 | TUES | 0.005 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 25 | WED | 0.011 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 26 | THURS | 0.001 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 27 | FRI | 0.002 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 28 | SAT | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 29 | SUN | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 30 | MON | 0.003 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 31 | TUES | 0.004 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AVERAGE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Certifying Signatures

Testing Laboratory

Company Name BCM LABORATORY Street Address 521 W GERMANTOWN PK Zip 19401

NORRISTOWN

Signature SA Nordstrom Title Lab Services Coordinator

Name Sharon A. Nordstrom

Date 2/8/84

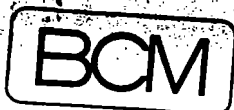
Signature Gardner

Name GARDNER K FLYNN, JR

Title PE

Date

ORIGINAL
(Red)



BCM Laboratory Division

821 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19482
215-825-3800

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
PO BOX 1424
HALVERN, PA 19355

00-701388

2/7/84

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

| | |
|--------------------------------|----------------|
| BCM NUMBER | N400659 |
| CLIENT SAMPLE ID | NO ID |
| DATE SAMPLED | 1/13/84 |
| DATE RECEIVED | 1/16/84 |
| TEST AND UNIT | (ANAL. METHOD) |
| ALUMINUM MG/L | (5) 0.363 |
| BOD/PH | (61) |
| BIOCHEMICAL OXYGEN DEMAND MG/L | 1330 |
| PH | 7.1 |
| CHLORIDE MG/L | (62) 17470 |
| CHEMICAL OXYGEN DEMAND MG/L | (5) 3740 |
| COPPER MG/L | (74) 1.16 |
| COD MG/L | (49) 25400 |
| COD MG/L | (75) 1.11 |

AMOUNT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



BCM Laboratory Division
621 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

ORIGINAL
(Red)

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BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800

CLIENT
METRO CONTAINER CORP

FINAL REPORT

2/7/84 PAGE 2

00-701388

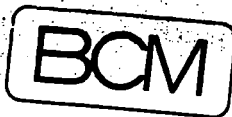
BACK NUMBER

1400655

| | | |
|---------------------------|-------|--------|
| OIL | (6) | 18 |
| 2 CARBONEXTRACTABLES MG/L | (29) | 0.195 |
| LEAD (GG) MG/L | (57) | 4.05 |
| PHENOLS - 24 PHENOL MG/L | (123) | 41 |
| SULFIDE AS S MG/L | (134) | 20.001 |
| SULFIDE AS SE MG/L | (141) | 21.00 |
| TIN MG/L | (51) | 45 |
| SUSPENDED SOLIDS MG/L | (7) | 480 |
| TOTAL ORGANIC CARBON MG/L | (44) | 1.86 |

FOR THE FOLLOWING ANALYSES: TOTAL ALKYL BENZENE, PPA, BIL, STRENGTH, & STRENGTH
ANALYSIS - 100% 100%
100% 100% 100% 100% 100% 100% 100% 100% 100% 100%
100% 100% 100% 100% 100% 100% 100% 100% 100% 100%
100% 100% 100% 100% 100% 100% 100% 100% 100% 100%
100% 100% 100% 100% 100% 100% 100% 100% 100% 100%

ON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

ORIGINAL
(Red)

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PLYMOUTH MEETING, PA 19482
215-825-3800

CLIENT
METRO CONTAINER CORP

FINAL REPORT

2/7/84 PAGE

3

00-701388

END OF REPORT

IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.

ORIGINAL
(Red)



BCM Laboratory Division

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PLYMOUTH MEETING, PA 19462
215-825-3800

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
2ND & PRICE STS
TRAINOR, PA 19013

00-701386

1/5/84

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

| | |
|--------------------------------|----------------|
| BCM NUMBER | N315300 |
| CLIENT SAMPLE ID | MONTHLY SAMPLE |
| DATE SAMPLED | 12/1/83 |
| DATE RECEIVED | 12/5/83 |
| TEST AND UNITS | (ANAL. METH.) |
| ALUMINUM MG/L | (9) 9.28 |
| BOD/FH | (61) |
| BIOCHEMICAL OXYGEN DEMAND MG/L | 720 |
| FH | 7.4 |
| CHLORIDE MG/L | (82) 4500 |
| CHEMICAL OXYGEN DEMAND MG/L | (5) 1700 |
| COPPER MG/L | (24) 0.46 |
| SOLIDS, DISSOLVED MG/L | (48) 6630 |
| IRON MG/L | (26) 2.71 |
| METAL DIGESTION MG/L AT 1 | (10) 11.0 |
| METAL DIGESTION MG/L AT 2 | (25) 10.1 |

RECEIVED
JAN - 9 1984
Metro Controls

PAYMENT DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.

ORIGINAL
(Red)



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
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PLYMOUTH MEETING, PA 19462
215-825-3800

FINAL REPORT

1/5/84 PAGE 2

CLIENT
METRO CONTAINER CORP

00-701388

| | |
|----------------------------------|------------|
| BCM NUMBER | N315300 |
| OIL | |
| % GREASE (FR. EXTRACTABLES) MG/L | (6) 13 |
| LEAD (GF) MG/L | (29) 0.184 |
| PHENOLS, as PHENOL MG/L | (57) 9.4 |
| SULFIDE AS S MG/L | 1.5 |
| SELENIUM (GF) MG/L | (38) 0.001 |
| TIN MG/L | (41) 0.10 |
| SUSPENDED SOLIDS MG/L | (51) 41 |
| TOTAL ORGANIC CARBON MG/L | (7) 394 |
| ZINC MG/L | (44) 0.52 |

LAB CERT. : EPA/PA-#36007, NJ-#73175, AL- #40300, EPA BULK ASBESTOS Q-#3335
AIHA/NIOSH-# 241/19401

METHODS : 5) EPA # 415.1 6) EPA # 413.1 7) EPA # 415.1 9) EPA # 800.1
24) EPA # 820.1 26) EPA # 836.1 29) EPA # 239.2 34) EPA # 245.1
36) EPA # 876.2 41) EPA # 267.1 44) EPA # 289.1 49) EPA # 160.1
51) EPA # 180.1 57) EPA # 400.01-01 61) EPA # 405.101 67) EPA # 320.1
68) EPA # 8270.1

ORIGINAL
(Red)



BCM Laboratory Division

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FINAL REPORT

1/5/64 PAGE 3

CLIENT
METRO CONTAINER CORP

00-701388

END OF REPORT

ORIGINAL
(Red)



DELAWARE COUNTY REGIONAL WATER QUALITY CONTROL AUTHORITY
P.O. Box 999 · 100 East Fifth Street · Chester, Pa. 19016 · (215) 876-5523

August 6, 1980

Mr. Sidney Levy, President
Universal Container Corporation
Second and Price Streets
Trainer, Pennsylvania 19013

Dear Mr. Levy:

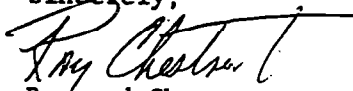
Attached please find an analysis of those wastewaters received into the Delcora system on June 8, 1980, from the Universal Container Corporation Facility, Trainer, Pennsylvania.

This analysis was performed on a grab sample and is used by us in assuring quality control of the industries we service. I am supplying you a copy for your own reference and information, and am also enclosing a reference of Delcora's regulations.

Please be advised that the Delcora limits for pH, Oil and Grease, Cadmium, Copper, Iron, Lead and Zinc are all exceeded. We would appreciate any and all endeavors to reduce the concentrations of these parameters to within Delcora limits.

Please call if you have any questions.

Sincerely,


Raymond Chestnut
Staff Engineer

RC:smi
Enclosures

ORIGINAL
(Red)

LOG NUMBER
07395

SAMPLE IDENTIFICATION

Sample #1

SAMPLE RECEIVED 7/3/80

ANALYSIS COMPLETED 7/23/80

COLLECTED BY

RESULTS (mg/L unless specified)

| TEST PARAMETER | 07395 | | | TEST PARAMETER | 07395 | | |
|----------------------------------|--------|---|--|----------------------------------|-------|---|--|
| BOD ₅ * | | | | Chlorine Demand | | | |
| COD | 12,038 | | | Chlorine Residual | | | |
| TOC | | | | Chloride (CL) | | | |
| Dissolved Oxygen | | | | Silica | | | |
| Suspended Solids | 2,650 | | | Petroleum HVC | | | |
| Total Solids | | | | Hardness (as CaCO ₃) | | | |
| Dissolved Solids | | | | | | | |
| Sett. Solids (m/L) | | | | | | | |
| pH | 11.56 | ✓ | | | | | |
| Phenols | | | | Aluminum | | | |
| Cyanide (Total) | | | | Antimony | | | |
| Fluoride | | | | Arsenic | | | |
| Cyanide (Free) | | | | Barium | | | |
| Surfactants (mg/L LAS) | | | | Boron | | | |
| Oil & Grease (Freon) | 781 | ✓ | | Cadmium | .25 | ✓ | |
| Vol. Sus. Solids | 860 | | | Calcium (Ca) | | | |
| Nitrogen (KJD as N) | | | | Chromium (Total) | 1.40 | | |
| Nitrogen (Ammonia as N) | | | | Chromium (Hexa) | <.1 | | |
| Nitrogen (Organic as N) | | | | Copper | 1.20 | ✓ | |
| Nitrite (N) | | | | Iron | 90.5 | ✓ | |
| Nitrate (N) | | | | Lead | 13.25 | ✓ | |
| Phosphate (P) Total | | | | Magnesium (Mg) | | | |
| Phosphate (P) - Ortho | | | | Manganese | | | |
| Sulfate (SO ₄) | | | | Mercury | | | |
| Sulfite (SO ₃) | | | | Nickel | <.1 | | |
| Sulfide | | | | Potassium | | | |
| Color | | | | Selenium | | | |
| Turbidity (NTU) | | | | Silver | | | |
| Conductivity (Micromohs) | | | | Sodium | | | |
| Alk (Total) as CaCO ₃ | | | | Tin | | | |
| Fecal Coliform | | | | Titanium | | | |
| Total Coliform | | | | Zinc | 21.5 | ✓ | |

A minimum of 5 sample dilutions were used for this determination.

Non-detectable, below the limit of detection.

3 COMMENT:

SPECIFIC
DELCORA STANDARDS
(per Resolution No. 73-28
adopted December 20, 1973)

| | | |
|--------------------------|--------------------|--------------------|
| Arsenic | (As) | 0.2 Mg/l |
| Barium | (Ba) | 4.0 |
| Cadmium | (Cd) | 0.04 |
| Chromium, + 6 | (Cr) | 0.1 |
| Chromium, Total | (Cr) | 5.0 |
| Copper | (Cu) | 0.2 |
| Lead | (Pb) | 0.2 |
| Mercury | (Hg) | 0.02 |
| Phenol | | 0.5 |
| Selenium | (Se) | 0.04 |
| Zinc | (Zn) | 1.0 |
| Nickel | (Ni) | 2.0 |
| Silver | (Ag) | 5.0 |
| Antimony | (Sb) | 5.0 |
| Iron | (Fe) | 3.0 |
| Manganese | (Mn) | 1.0 |
| Total Dissolved Solids | (TDS) | 1000 |
| Hydrogen Sulfide | (H ₂ S) | 2.0 |
| Sulfur Dioxide | (SO ₂) | 2.0 |
| Nitrous Oxide | (N ₂ O) | 2.0 |
| Temperature | | not to exceed 65 C |
| Fats, wax, grease or oil | | 100.0 |
| pH | | not to exceed 9.5 |

For further information refer to Delcora resolution No. 73-28 Article VI.

YOUNG, CONAWAY, STARGATT & TAYLOR

H. JAMES CONAWAY, JR.
BRUCE M. STARGATT
WILLIAM F. TAYLOR
RICHARD H. MAY
STUART B. YOUNG
BEN T. CASTLE
EDWARD B. MAXWELL, 2ND
SHELDON A. WEINSTEIN
ARTHUR INDEN
SHELDON N. SANDLER
RICHARD A. LEVINE
SYDNEY R. CHIRLIN
RICHARD A. ZAPPA
FREDERICK W. IOBST
RICHARD H. MORSE
DAVID C. MCBRIDE
JOSEPH M. NICHOLSON
JOHN VINCENT ALEXANDER
BARRY M. WILLOUGHBY

JOSY W. INGERSOLL
JOSEPH J. RHOADES
ANTHONY G. FLYNN
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EUGENE A. DIPRINZIO
JAMES F. MAHER
GEORGE B. SMITH
JAMES L. PATTON, JR.
WILLIAM D. JOHNSTON
TIMOTHY J. SNYDER
ALISON WHITMER TUMAS
JEFFREY K. MARTIN
MICHAEL P. MORTON
BRUCE L. SILVERSTEIN
RICHARD A. DILIBERTO, JR.
LAURA DAVIS JONES
MELANIE K. SHARP
E. SCOTT BRADLEY

ELEVENTH FLOOR
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P.O. Box 391
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(302) 571-6600
(800) 253-2234 (DE ONLY)
TELECOPIER: (302) 571-1253

WRITER'S DIRECT DIAL NUMBER
571-6642

H. ALBERT YOUNG
1929-1982

GEORGETOWN OFFICE

CRAIG A. KARSNITZ
RESIDENT PARTNER
KATHI ANN KARSNITZ
ELIZABETH K. RODRIGUEZ

P.O. BOX 594
110 WEST PINE STREET
GEORGETOWN, DELAWARE 19947
(302) 856-3571
(800) 255-2234 (DE ONLY)

ORIGINAL
(Red)

November 17, 1988

Lawrence Falkin,
Compliance Officer
U.S. EPA
841 Chestnut Building
6th Floor
Philadelphia, PA 19107

RE: Metro Container Corp.
Metro-Enterprise Container Corp.

Dear Larry:

Pursuant to the 104(e) requests of the above two debtors,
one box of documents is being forwarded to you by United States
Parcel Service.

Very truly yours,

Laura Davis Jones
Laura Davis Jones

LDJ/mmm

cc: James L. Patton, Jr., Esq.
Walter B. Dennen, Esq.



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

6/18/84

Attn: Mr Kenneth L Vogt, Jr, PE

Subject: Industrial Wastewater Permit #01-01-0644-02-02
Re: May 1984 Monthly Report/Quarterly USEPA Priority Pollutant Reports

Dear Ken:

Enclosed are subject reports as required by our permit.

Please let us know if you have any questions or comments on the attached.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer

100 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS SECOND & PRICE STS
CITY TRAFFER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

PERMIT
NO. 01-01
0644-02-02
S.I.C.
CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

if into process 15 min

| MONTH AND YEAR | DATE | DAY OF THE WEEK | PRECIPITATION INCHES | TYPE OF SAMPLE | FLOW MGD | TEMPERATURE OF | PH | SUSPENDED SOLIDS mg/l | TOTAL DISSOLVED SOLIDS mg/l | BOD ₅ mg/l | COD mg/l | PHENOLS mg/l | SULFIDES mg/l | K - NITROGEN mg/l | CHLORIDES mg/l | MERCURY Hg mg/l | IRON Fe mg/l | COPPER mg/l | ZINC mg/l | NICKEL mg/l | CHROMIUM mg/l | CYANIDE mg/l | OIL AND GREASE mg/l | TURBIDITY J.T.U. | COLOR mg/l | OTHER mg/l | OTHER mg/l | OTHER mg/l | OTHER mg/l | REMARKS |
|----------------|------|-----------------|----------------------|----------------|----------|----------------|----|-----------------------|-----------------------------|-----------------------|----------|--------------|---------------|-------------------|----------------|-----------------|--------------|-------------|-----------|-------------|---------------|--------------|---------------------|------------------|------------|------------|------------|------------|------------|---------|
| JULY '84 | 1 | S | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 2 | W | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 3 | TH | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 4 | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 5 | S | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 6 | SU | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 7 | W | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8 | TH | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 9 | W | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 10 | TH | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 11 | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 12 | S | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 13 | SU | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 14 | W | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 15 | TH | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 16 | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 17 | S | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 18 | SU | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 19 | W | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 20 | TH | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 21 | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 22 | S | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 23 | SU | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 24 | W | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 25 | TH | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 26 | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 27 | S | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 28 | SU | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 29 | W | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 30 | TH | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 31 | F | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| REMARKS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Company Name BCM LABORATORY Street Address 521 W GERMANTOWN PK City NORRISTOWN State PA Phone No (215) 825-0447
Signature _____ Title _____
Signature _____ Title _____



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19482
215-825-3800

ORIGINAL
(Red)

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
PO BOX 1424
MALVERN, PA 19355

00-701366

6/12/84

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

| | |
|--------------------------------|-------------------|
| BCM NUMBER | N407041 |
| CLIENT SAMPLE ID | WWTF EFFL
UEN1 |
| DATE SAMPLED | 5/2/84 |
| DATE RECEIVED | 5/3/84 |
| TEST AND UNITS | (ANAL. METHOD) |
| SILVER MG/L | (37) 10.02 |
| ALUMINUM MG/L | (9) 1.91 |
| ARSENIC (GF) MG/L | (12) 0.029 |
| BERYLLIUM MG/L | (10) 10.01 |
| BOD/PH | (61) |
| BIOCHEMICAL OXYGEN DEMAND MG/L | 2900 |
| PH | 8.9 |
| CADMIUM MG/L | (16) 10.01 |
| CHLORIDE MG/L | (80) 9592.8 |
| CYANIDE MG/L | (14) 0.02 |
| CHEMICAL OXYGEN DEMAND MG/L | (12) 11.0 |

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.

ORIGINAL
(Red)



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
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215-825-3800

FINAL REPORT

6/12/84 PAGE 2

CLIENT
METRO CONTAINER CORP

00-701366

| BCM NUMBER | N407041 |
|----------------------------------|--------------|
| CHROMIUM AS CR MG/L | (19) 0.22 |
| COPPER MG/L | (24) <0.03 |
| SOLIDS, DISSOLVED MG/L | (49) 15028 |
| IRON MG/L | (26) 0.25 |
| GC/MS ACID EXTRACTABLES MT.DY | (172) 6.10 |
| GC/MS BASE NEUTRALS MT.DY | (172) 6.10 |
| GC/MS PESTICIDES MT.DY | (172) 6.10 |
| GC/MS VOLATILES MT.DY | (141) 6.10 |
| MERCURY MG/L | (32) <0.0005 |
| METAL DIGESTION (NC) MT.DY | (110) 5.4 |
| NICKEL MG/L | (34) <0.10 |
| OIL | |
| 1 GREASE (FR. EXTRACTABLES) MG/L | (6) 74 |
| LEAD (GP) MG/L | (29) 0.186 |
| PHENOLS, 24 PHENOL MG/L | (57) 7.25 |
| SULFIDE AS S MG/L | (123) 1 |

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



BCM Laboratory Division

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ORIGINAL
(Red)

FINAL REPORT

6/12/84 PAGE 3

CLIENT
METRO CONTAINER CORP

00-701386

BCM NUMBER

N407041

| | |
|---------------------------|------------|
| ANTIMONY MG/L | (11) 0.45 |
| SELENIUM AS SF MG/L | (36) 0.001 |
| TIN MG/L | (41) <1.00 |
| SUSPENDED SOLIDS MG/L | (51) 55 |
| THALLIUM MG/L | (40) <0.30 |
| TOTAL ORGANIC CARBON MG/L | (7) 1290 |
| ZINC MG/L | (44) 0.50 |

LAB CERT. : EPA/PA-136007, NO-177125, AI-140300, EPA RULE ABREVIATION B-1335
AIR/NIOSH-1 141/19401

METHODS : 51 EPA # 415.1 60 EPA # 415.1 71 EPA # 415.1 72 EPA # 240.1
111 EPA # 244.1 112 EPA # 204.2 157 EPA # 210.1 161 EPA # 312.1
162 EPA # 216.1 241 EPA # 220.1 261 EPA # 236.1 291 EPA # 239.2
321 EPA # 245.5 341 EPA # 249.1 361 EPA # 270.3 371 EPA # 272.1
401 EPA # 275.1 411 EPA # 282.1 441 EPA # 289.1 491 EPA # 160.1
511 EPA # 160.1 571 EPA # 420.1-3 711 EPA # 405/100 821 EPA # 315.3
841 EPA # 330 10-31 110 EPA - METALS 1031 EPA # 376.7 1411 EPA # 174
1711 EPA # 170

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.

ORIGINAL
(Red)



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

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PLYMOUTH MEETING, PA 19462
215-825-3800

FINAL REPORT

6/12/84 PAGE

4

CLIENT
METRO CONTAINER CORP

00-701368

END OF REPORT

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



CHEM TEK SERVICES

Paoli Plaza • P. O. Box 1145, Paoli, Pa. 19301 • (215) 436-4161

ORIGINAL
(Red)

DELCORA
PO Box 999
100 East Fifth St
Chester, Pa 19016

5/20/84

Attn: Mr Kenneth L Vogt, Jr, PE

Subject: Industrial Wastewater Permit #01-01-0644-02-02
Re: April 1984 Monthly Report

Dear Ken:

Enclosed is subject report as required by our permit which includes
the total # of drums processed.

Please let us know if you have any questions or comments on the attached.

Very truly yours,

Gardner K Flynn, Jr
Consulting Engineer

100 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

PERMIT
NO. 01-01
0644-02-02
S.I.C.
CODE 3412

MONTHLY REPORT FORM

OFFICIAL USE ONLY

of units $12,5580 = 49,000$

[illegible]

1 Certifying Signatures

Testing Laboratory

Company Name BCM LABORATORY Street Address 521 W GERMANTOWN PKWY 19401

Signature _____ Title _____

Signature [Signature] Title RE
Name GARDNER K FLYNN, JR Date

City NORRISTOWN

State PA

Phone No. (215) 825-0447

Name

(print or type)

— Dato

1. Nama GAI

GARDNER K FLYNN

914



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA. 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA. 19462
215-825-3800

ORIGINAL
(Red)

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
PO BOX 1424
MALVERN, PA 19355

00-701388

5/8/84

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

| | |
|--------------------------------|---------------|
| BCM NUMBER | N405290 |
| CLIENT SAMPLE ID | NO ID |
| DATE SAMPLED | 4/3/84 |
| DATE RECEIVED | 4/5/84 |
| TEST AND UNITS | (ANAL. METH.) |
| ALUMINUM MG/L | (9) 1.10 |
| BOD/PH | (61) |
| BIOCHEMICAL OXYGEN DEMAND MG/L | 3300 |
| PH | 7.8 |
| CHLORIDE MG/L | (62) 12868.3 |
| CHEMICAL OXYGEN DEMAND MG/L | (5) 3985 |
| COPPER MG/L | (24) 0.20 |
| SOLIDS, DISSOLVED MG/L | (49) 13190 |
| IRON MG/L | (26) 0.39 |
| METAL DIGESTION (NO) MT.DY | (110) 4.6 |
| NICKEL MG/L | (34) 0.10 |

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM

**BCM Laboratory Division**521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447PLEASE REMIT CHECKS TO:
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800ORIGINAL
(Red)

FINAL REPORT

5/8/84 PAGE 2

CLIENT

METRO CONTAINER CORP

00-701388

| BCM NUMBER | N405290 |
|----------------------------------|------------|
| OIL | |
| % GREASE (FR. EXTRACTABLES) MG/L | (6) 37 |
| LEAD (GF) MG/L | (29) 0.110 |
| PHENOLS, as PHENOL MG/L | (57) 18.8 |
| SULFIDE AS S MG/L | (123) <1 |
| SELENIUM AS SE MG/L | (36) <0.01 |
| TIN MG/L | (41) <1.00 |
| SUSPENDED SOLIDS MG/L | (51) 60 |
| TOTAL ORGANIC CARBON MG/L | (7) 821 |
| ZINC MG/L | (44) 0.75 |

LAB CERT. : EPA/PA-#38007, NJ-#77175, AL- #40300, EPA BULK ASBESTOS Q-#3335
AIHA/NIOSH-# 241/19401METHODS : 5) EPA # 415.1 6) EPA # 413.1 7) EPA # 415.1 9) EPA # 200.1
24) EPA # 220.1 26) EPA # 236.1 29) EPA # 239.2 34) EPA # 249.1
36) EPA # 270.3 41) EPA # 282.1 44) EPA # 289.1 49) EPA # 160.1
51) EPA # 160.1 57) EPA # 420.1 (1-7) 61) EPA # 405/150 62) EPA # 325.3
110) EPA - METALS 123) EPA # 376.1

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM.



BCM Laboratory Division

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215-825-0447

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1 PLYMOUTH MEETING
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215-825-3800

ORIGINAL
18462

FINAL REPORT

5/8/84 PAGE

3

CLIENT

METRO CONTAINER CORP

00-701388

END OF REPORT

PAYMENT IS DUE UPON RECEIPT OF INVOICE. PAST DUE AMOUNTS OVER 30 DAYS WILL BE SUBJECT TO AN INTEREST RATE OF 18% PER ANNUM



CHEM TEK SERVICES

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ORIGINAL
(Red)

DEOCORA
P O Box 999
100 East Fifth St
Chester, Pa 19016

1/19/84

Attn: Mr K L Vogt, PE

Subject: December 1983 Monthly Report - Permit #01-01-0644-02-02

Dear Ken:

Attached please find the monthly report as required by our permit.
If you have any questions or comments, please do not hesitate to
contact us.

Very truly yours,

G K. Flynn, Jr
Consulting Engineer

100 East Fifth Street
Chester, Pennsylvania 19013

STREET ADDRESS SECOND & PRICE STS
CITY TRAINER STATE PA
ZIP 19016 PHONE NUMBER (215) 494-8200

PERMIT
NO. 01-01
0644-02-02
S.I.C.
CODE 3412

MONTHLY REPORT FORM
OFFICIAL USE ONLY

TOTAL DRUMS PROCESSED = 45,000

| MONTH
AND
YEAR | DATE | DAY OF THE
WEEK | PRECIPITATION
INCHES | TYPE OF
SAMPLE | FLOW
MGD | TEMPERATURE
OF | PH | SUSPENDED
SOLIDS mg/l | TOTAL DISSOLVED
SOLIDS mg/l | BOD ₅
mg/l | COD
mg/l | PHENOLS
mg/l | SULFIDES
mg/l | K - NITROGEN
mg/l | CHLORIDES
mg/l | MERCURY
Hg mg/l | IRON
Fe mg/l | COPPER
mg/l | ZINC
mg/l | NICKEL
mg/l | CHROMIUM
mg/l | CYANIDE
mg/l | OIL AND GREASE
mg/l | TURBIDITY
J.T.U. | COLOR | OTHER
TIN, mg/l | OTHER
TOC, mg/l | OTHER
ALUMINUM, mg/l | OTHER
Selenium, mg/l | Lead, mg/l | REMARKS |
|----------------------|------|--------------------|-------------------------|-------------------|-------------|-------------------|-----|--------------------------|--------------------------------|--------------------------|-------------|-----------------|------------------|----------------------|-------------------|--------------------|-----------------|----------------|--------------|----------------|------------------|-----------------|------------------------|---------------------|-------|--------------------|--------------------|-------------------------|-------------------------|------------|---------|
| December | 1 | Th | 0 | F | 0.0027 | 77° | 7.4 | 41 | 8830 | 720 | 1200 | 9.4 | 1.5 | — | 4500 | — | 2.71 | 0.96 | 0.52 | 50.1 | — | — | 13 | — | — | — | — | — | — | — | — |
| | 2 | Fri | | | 0.0056 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 3 | Sat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 4 | Sun | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 5 | Mon | | | 0.0010 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 6 | Tue | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 7 | Wed | | | 0.0017 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 8 | Thur | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 9 | Fri | | | 0.0006 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 10 | Sat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 11 | Sun | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 12 | Mon | | | 0.0042 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 13 | Tue | | | 0.0013 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 14 | Wed | | | 0.0019 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 15 | Thurs | | | 0.0052 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 16 | Fri | | | 0.0027 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 17 | Sat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 18 | Sun | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 19 | Mon | | | 0.0055 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 20 | Tue | | | 0.0021 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 21 | Wed | | | 0.0030 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 22 | Thur | | | 0.0024 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 23 | Fri | | | 0.0035 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 24 | Sat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 25 | Sun | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 26 | Mon | | | 0.0037 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 27 | Tue | | | 0.0032 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 28 | Wed | | | 0.0015 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 29 | Thur | | | 0.0076 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 30 | Fri | | | 0.0051 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 31 | Sat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL | | | | | 0.0845 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AVERAGE | | | | | 0.0041 | | | | | | | | | | | | | | | | | | | | | | | | | | |

Certifying Signatures

Testing Laboratory

Company Name BCM LABORATORY Street Address 521 W GERMANTOWN PK Zip 19401

City NORRISTOWN

State PA

Phone No (215) 825-0447

Signature SA. Nordstrom

Name Sharon A. Nordstrom

Title Coord

Date 1/16/88

Signature [Signature]

Name GARDNER K. FLYNN, JR

Title

Date



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO:
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800

ORIGINAL
(Red)

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
PO BOX 1424
MALVERN, PA 19355

00-701388

3/28/84

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have questions concerning this report please call 215-825-0447.

BCM NUMBER N403438

CLIENT SAMPLE ID SAMPLE

DATE SAMPLED 3/6/84
DATE RECEIVED 3/8/84

TEST AND UNITS (ANAL. METH.)

ALUMINUM MG/L (9) 1.91

BOD/PH (61)

BIOCHEMICAL OXYGEN DEMAND MG/L 1290

PH 8.5

CHLORIDE MG/L (62) 4459.4

CHEMICAL OXYGEN DEMAND MG/L (5) 2400

COPPER MG/L (24) <0.03

SOLIDS, DISSOLVED MG/L (49) 8540

IRON MG/L (26) 0.52

METAL DIGESTION (NO) MT.DY (110) 3.9

NICKEL MG/L (34) <0.10



BCM Laboratory Division

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ORIGINAL
(Red)

FINAL REPORT

3/28/84 PAGE 2

CLIENT

METRO CONTAINER CORP

00-701388

| BCM NUMBER | | N403438 |
|---|-------|---------|
| OIL
& GREASE (FR. EXTRACTABLES) MG/L | (6) | 52 |
| LEAD (GF) MG/L | (29) | 0.076 |
| PHENOLS, as PHENOL MG/L | (57) | 6 |
| SULFIDE AS S MG/L | (123) | <1.0 |
| SELENIUM AS SE MG/L | (36) | <0.001 |
| TIN MG/L | (41) | <1.00 |
| SUSPENDED SOLIDS MG/L | (51) | 19 |
| TOTAL ORGANIC CARBON MG/L | (7) | 427 |
| ZINC MG/L | (44) | 0.24 |

LAB CERT. : EPA/PA-#38007, NJ-#77175, AL- #40300, EPA BULK ASBESTOS Q-#3339
AIHA/NIOSH-# 241/19401

METHODS : 5) EPA # 415.1 6) EPA # 413.1 7) EPA # 415.1 9) EPA # 202.1
24) EPA # 220.1 26) EPA # 236.1 29) EPA # 239.2 34) EPA # 249.1
36) EPA # 270.3 41) EPA # 282.1 44) EPA # 289.1 49) EPA # 160.1
51) EPA # 160.1 57) EPA # 420.(1-2) 61) EPA # 405/150 62) EPA # 325.3
110) EPA - METALS 123) EPA # 376.2



BCM Laboratory Division

521 W. GERMANTOWN PIKE
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215-825-0447

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215-825-3800

ORIGINAL
(Red)

FINAL REPORT

3/28/84 PAGE

3

CLIENT
METRO CONTAINER CORP

00-701388

END OF REPORT



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

PLEASE REMIT CHECKS TO **ORIGINAL**
BCM Eastern Inc.
1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800
(Red)

CLIENT

METRO CONTAINER CORP
ATTN MR GARDNER FLYNN
PO BOX 1424
MALVERN, PA 19355

00-701386

3/7/84

FINAL REPORT

REF:

PAGE 1

This is the final report for the samples shown below. If you have any questions concerning this report please call 215-825-0447.

BCM NUMBER

0401647

CLIENT SAMPLE ID

WASTE WAT
EE P AMI

DATE SAMPLED

2/15/84

DATE RECEIVED

2/16/84

TEST AND UNITS

ANAL. DATA

SILVER MG/L

137 10.01

ALUMINUM MG/L

150 0.50

ARSENIC (GF) MG/L

15 0.430

BERYLLIUM MG/L

112 0.11

BOI/PH

BIOCHEMICAL OXYGEN DEMAND (BOD) MG/L

PH

CADMIUM MG/L

100

CHLORIDE MG/L

100

COPPER MG/L

100

IRON MG/L

100



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

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215-825-3800

ORIGINAL
(Red)

FINAL REPORT

3/7/84 PAGE 2

CLIENT

METRO CONTAINER CORP

00-701328

| | |
|--------------------------------------|-------------|
| BCM NUMBER | N401843 |
| CHROMIUM AS CR MG/L | 0.190 0.002 |
| COPPER MG/L | 0.240 0.030 |
| SOLIDS, DISSOLVABLE MG/L | 0.490 0.080 |
| IRON MG/L | 0.280 0.005 |
| GC/MS ACID EXTRACTABLES NT/01 | 3.0 |
| GC/MS BASE NEUTRALS NT/01 | 3.0 |
| GC/MS PESTICIDES NT/01 | 3.0 |
| GC/MS VOLATILES NT/01 | 3.0 |
| MERCURY MG/L | 0.000 0.000 |
| METAL DIGESTION (NO) NT/01 | 0.000 0.000 |
| NICKEL MG/L | 0.000 0.000 |
| GC/MS GREASE/FAT, EXTRACTABLES NT/01 | 3.0 |
| LEAD (GFP) MG/L | 0.000 0.000 |
| PHENOL, AS PHENOL MG/L | 0.000 0.000 |
| TOXICITY AS PHENOL | 0.000 0.000 |



BCM Laboratory Division

521 W. GERMANTOWN PIKE
NORRISTOWN, PA 19401
215-825-0447

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1 PLYMOUTH MEETING
PLYMOUTH MEETING, PA 19462
215-825-3800

ORIGINAL
(Red)

FINAL REPORT

3/7/84 PAGE 3

CLIENT

METRO CONTAINER CORP

00-701326

| BCM NUMBER | NAQ1843 |
|--------------------------|------------|
| ANTIMONY MG/L | (11) 0.00 |
| SELENIUM AS SE MG/L | (36) 0.001 |
| TIN MG/L | (41) 0.00 |
| SUSPENDED SOLIDS MG/L | (10) 0.0 |
| THALLIUM MG/L | (40) 0.0 |
| TOTAL ORGANIC CARBON PPM | (7) 0.217 |
| ZINC MG/L | (44) 1.07 |

REMARKS

BCM SAMPLE NO: NAQ1843

SAMPLE IN 40% WATER SLURRY

LAB OFF: 1. STANFORD LABORATORY, 100 STANFORD AVE, STANFORD, CA 94305
ATRA 1100-4



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METHODS : 5) EPA # 415.1 6) EPA # 413.1 7) EPA # 415.1 9) EPA # 215.1
11) EPA # 204.1 12) EPA # 206.2 15) EPA # 211.1 16) EPA # 213.1
19) EPA # 218.1 24) EPA # 220.1 26) EPA # 236.1 28) EPA # 135.1
32) EPA # 245.5 34) EPA # 249.1 36) EPA # 220.3 37) EPA # 221.1
40) EPA # 279.1 41) EPA # 261.1 44) EPA # 269.1 49) EPA # 141.1
51) EPA # 140.1 57) EPA # 400.1-3 61) EPA # 405.1 62) EPA #
64) EPA # 235.12-3 111) EPA # 121.1 123) EPA # 214.1

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